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ABSTRACT

This Leader Guide and Parent Workbook has been designed to educate parents in skills for the effective communication of acceptance and the constructive management of power in relation to their children. Included is an overview of the Communication and Parenting Skills Program (CAPS), a discussion of the skills, guidelines for group leadership, home activities, and an outline of the CAPS program. The program involves goal setting, communication in the family, problem solving in the family setting, drug education and an assessment of goal attainment. The program is designed for a class of 10-12 parents meeting once a week for a two-hour session. (PC)

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National Institute On Drug Abuse

COMMUNICATION
AND
PARENTING
SKILLS

Leader Guide
and
Parent Workbook

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U.S. Department of Health, Education, and Welfare
Public Health Service
Alcohol, Drug Abuse, and Mental Health Administration

COMMUNICATION AND PARENTING SKILLS

Leader Guide

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Program Outline

WEEK 1 -- UNIT 1 - INTRODUCTION: SETTING GOALS

WEEKS 2, 3, and 4 -- UNIT II - COMMUNICATION IN THE FAMILY

- A. Acceptance: The Art of Good Listening and Empathic Responding
- B. "I-Messages": Your Own Feelings

WEEKS 5 and 6 -- UNIT III - PROBLEM-SOLVING IN THE FAMILY

- A. Anticipatory Decision-Making
- B. Problem-Solving Through Positive Guidance

WEEKS 7 and 8 -- UNIT IV - DRUG EDUCATION IN THE FAMILY

WEEK 9 -- UNIT V - CONCLUSION: ASSESSMENT OF GOAL ATTAINMENT

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Chapter One
INTRODUCTION

Parenting relationships, like other intimate interpersonal relationships, have been found to involve two crucial dimensions: acceptance and power.[1,2] The *Communication and Parenting Skills Program* (CAPS) has been designed to educate parents in skills for the effective communication of acceptance and the constructive management of power. While most parents intend to convey feelings of love, warmth and understanding to their children, they often are not aware of the actual messages their behaviors convey. Similarly, genuinely loving parents fail to demonstrate their love to their children because doing so is inhibited by unfortunate notions about discipline and insuring children's respect. This is, in trying to manage their power role, they undermine their demonstrations of acceptance.

One young mother put it this way. "I wanted to love my kids, but I was afraid to get too close because I thought they wouldn't obey me. When they were infants, I held myself back from cuddling or even picking them up sometimes when they were crying--I'd been warned that they would get spoiled if I did. Later, I wondered if that was true. I felt so much love for them that I couldn't show; that can't be right! I also realize now that I wasn't seeing them as individuals. Now I can listen to them and I try to understand their separate needs."

Parents are Teachers

Parental acceptance and power are further complicated by a unique aspect of the parenting role, that of teacher. Parents are teachers for their children. Few parents understand how to be teachers, although competence in teaching cognitive skills to preschool children is increasing. What parents fail to take advantage of is their uniquely good position to *continue* to teach children as they develop cognitive, social and work skills and points of view.

It is true that much of the teaching of social skills and values, relationship styles, leisure pursuits, and work habits is indirect. Children learn

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[1] Foa, U. G. and Foa, K. Societal Structures of the Mind. Chicago: C. C. Thomas, 1974.

[2] Schaeffer, E. S. A Configurational Analysis of Children's Reports of Parent Behavior. Journal of Consulting Psychology, 1965, 29, 552-557.

through observing their parents in their own work, in interaction with each other, and in relation to other people in varied contexts. In this way, parents are significant *models* for their children for many acquired behavioral and attitudinal patterns. Modeling, however, can be more deliberate and witting if the parents are alerted to the concept and are able to see the power of their actions to influence their children's behaviors, including drug and alcohol behaviors.

Parents also teach directly about these same aspects of living by instructing their children in behavior with siblings, adults, and friends and in school work behavior. Sometimes they attempt to instruct their children in what to think as well. Much of this teaching fails. The failure is due to two factors. First, the emphasis is usually negative in that parents tell children what not to do, how not to act, what they should not think. This negative guidance only indicates what is "wrong" rather than what is "right" or preferred. When parents do voice preferences, the statements tend to be too vague to help the child understand how to act. Furthermore, they often omit their reasoning. Expectations need to be positively expressed and specific in order to be useful guides to children: what the parent would like to see and even how to carry it out. Secondly, learning proceeds most effectively through guided exploration of ideas and examination of related feelings. Didactic instruction is too frequently learned only to be forgotten. Helping parents to learn how to listen and explore with the child as a way of direct teaching should increase the child's attentiveness, interest, and knowledge.

Parents can be taught skills to help them help their children develop positive self-concepts and valuable "skills for living"--intellectual skills like reading and math, affective skills like decision-making and values clarification, interpersonal skills like good listening and sharing feelings, and work skills like organizational ability, perserverence, and leadership. The focus is on modifying parents' behaviors and attitudes so that they in turn may promote and shape their children's development in accord with personal goals. This is not to imply that children's behaviors do not influence their parents ways of acting; on the contrary, parent and child influence each other in successive interactions, somewhat like the interaction of atomic particles in a nuclear reactor in which chains of reaction are induced. However, parents can become directed and facilitative in their relationships with their children--that is, goal directed and purposive rather than simply reactive--if they are educated in basic skills which are *generic* across situations.

A Skills Orientation

Parent education and counseling has a long national and international history. Concern about the role of parents in child and family development is familiar in our society, having been in evidence since the late nineteenth century. While the emphasis on skills learning is a recent phenomenon, it might be said that all forms of parent education or counseling in one way or another broaden the problem-solving skills of the participants. In so doing, the attainment of the fundamental goals of education for parental competence is fostered: to enable parents to best promote the child's positive self-affirmation as a worthy, unique person[3] and her or his successful achievement of developmental tasks.[4]

In CAPS, attention is given to teaching skills for maximizing parents' abilities for "growing children"[5] and for deriving increased satisfaction as their relationships with their children develop. Parent education and counseling in the past have emphasized discussion of attitudes, child development, and specific problem areas. While these are important to address, discussion based approaches tend to be insufficiently structured and are incapable of providing participants with new or alternate *behaviors* to replace less facilitative ones.[6] Skill training, as a fundamental approach to training helping professionals, has recently been extended to training parents as mental health agents for their children. Skill training stresses the teaching of specific new behaviors which are deemed, through experience and research, facilitative in promoting child development and satisfying parent-child relations.

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[3] Ardrey, R. The Social Contract. New York: Atheneum Press, 1970.

[4] Havighurst, R. J. Developmental Tasks and Education. New York: Longmans, 1951; Erikson, E. H. Childhood and Society. New York: Norton, 1950; Newman B. M. and Newman, P. R. Development through Life: A Psychosocial Approach. Homewood, Ill.: Dorsey Press, 1975.

[5] Horowitz, F. D. Directions for Parenting. In Mash, E. J., Hamerlynck, L. A., and Handy, L. C. (Eds.), Behavior Modification and Families. New York: Brunner/Mazel, 1976.

[6] A study conducted by the authors in 1975 compared the skills training and discussion approaches focusing on the same concepts. Treatments differed in that only the skills condition received practice in using the concepts behaviorally. Results indicate that skills training involving practice is necessary for the learning of new verbal behaviors.

The approach in CAPS has been derived largely from Guerney's[7] work in foster parent training. The original CAPS version[8] with its emphasis on drug abuse prevention was a modification of her approach. Conceptually and methodologically, CAPS has also drawn from Gordon's and Dreikurs' work in parenting.[9]

In CAPS, ten to twelve parents are enrolled in each class group. Groups meet for two hours once a week. The parents are sensitized to constructive responses in interaction with their children and are instructed in a delineated set of verbal and thinking behaviors. The set of skills includes: good listening, empathic responding, sharing feelings through "I-messages," anticipatory decision-making, positive guidance, modeling for preferred behavior, and direct teaching in teachable moments. These parenting relationship skills are offered as more effective responses than the common destructive responses, prevalent particularly in moments of frustration or conflict--shaming, ridiculing, denying or ignoring the child's feelings, moralizing, and commanding. Further, they are offered as potentially appropriate alternatives for what we have labelled "typical parenting responses." These responses include rational arguments, asking probing closed-ended questions, and giving reassurance or sympathy. These latter responses may be appropriate in particular situations, but are not usually the most facilitative in communicating acceptance, solving problems, or exploring new ideas.

Parents are helped in CAPS to learn and integrate the new behavioral options into their repertoires and to assess when particular responses are more appropriate than others. They are also helped to examine their relationships with their children. Setting goals for the enhancement of their own behavior and that of their children is included as well. Periodic goal setting and assessment are encouraged following participation in CAPS to foster further relationship development. Doing so will also keep parents mindful of their responsibilities and rights in "raising their children," and will help them to maintain a focused and meaningful approach to family life.

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[7] Guerney, L. F. Foster Parent Training Program. University Park, PA: Center for Human Service Development, The Pennsylvania State University, 1975; Guerney, L. F. Training Parents in Fostering Skills: Program Description and Evaluation. Paper presented at the meeting of The American Psychological Association, New Orleans, August 1974.

[8] D'Augelli, J. F. and Weener, J. M. Communication and Parenting Skills. Unpublished Manuals, The Pennsylvania State University, 1974/1975; D'Augelli, J. F. and Weener, J. M. Development of a Parent Education Program as a Drug Abuse Prevention Strategy. University Park, PA: Addictions Prevention Laboratory, The Pennsylvania State University, 1975.

[9] Dreikurs, R. and Grey, L. A Parents' Guide to Child Discipline. New York: Hawthorn Books, 1970; Gordon, T. Parent Effectiveness Training. New York: Wyden, 1970.

Parents who have "graduated" from CAPS report changes in their own behavior, in their children's behavior and in their relationships. Many say they are better able to understand and communicate the child's point of view, have a heightened sensitivity to their child's feelings, and have improved abilities to listen closely to their children's feelings and ideas. More sensitivity to the reality of the child's problems and individuality is also supported. Parents also seem to "unlearn" destructive responses, such as moralizing, exhorting, shaming, and arbitrarily commanding. Various specific modifications in relationships with the child occur, as well. A number of parents speak of specific changes in the child's behavior, generally reflecting less conflict, less obstructive behavior, and fewer annoying behaviors. Reductions in unsatisfying relations with the child are therefore potential outcomes of CAPS training. Other research[10] regarding the impact of related parent training, therapy or counseling on children tends to indicate that children learn more about their feelings, are able to express their feelings more openly, and generally improve in behavior at home and at school. Increased leadership, and friendship patterns, and academic achievement have also been noted.

With respect to drugs and drug use, CAPS parents come to feel more capable of dealing with drug situations. A majority report feeling that they had learned to communicate openly about drugs and use. Less anxiety about the area is experienced, along with a greater willingness to explore the child's curiosity and feelings in both structured and informal ways. Most parents emerge with a fuller understanding of their modeling influence with regard to drugs like alcohol, tobacco, aspirin and prescribed drugs. A number report decreasing or ceasing to use tobacco or alcohol.

CAPS seem to be effective in meeting its goals. Enhanced skills in dealing with parent-child dilemma situations is generally accompanied by enhanced acceptance of the child. Much depends on the leadership skill with which the groups are run. Outcome also depends upon the acceptance, warmth and concern conveyed by the leader(s): success is often related to the effectiveness and enthusiasm of the leaders. If the leader understands the concepts, is fluent with the skills, and genuinely cares about the parents in the class group, CAPS will be successful.

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[10] Tavormina, J. B. Basic Models of Parent Counseling. Psychological Bulletin, 1974, 81, 827-835.

Chapter Two

THE SKILLS

CAPS approaches constructive parenting from an integrated perspective of building communication, power management, and teaching skills together. This *Building Block Approach* allows parents to learn one skill at a time, but to practice the skills together as they are learned. The goal is to help parents integrate these new behaviors into their repertoire so that they will be able to respond fluently and constructively in their ongoing interactions with their children.

Good Listening and Empathic Responding

Good listening, as an attitude and skill, is the foundation block upon which the other skills rest. It is also the key to developing satisfying relationships. Being a good listener requires an active involvement in hearing and trying to understand the messages of the child. Messages are sent in words, gestures, tone of voice, choice of words, and in ommitted words. Parents generally listen for specific content. They listen and react to the concrete message. Good listening skills enable them to get in touch with the message(s) underneath the obvious one. Attending to feelings and being able to identify them is the crux of good listening. Good listening will, however, also enable parents to better comprehend the concrete message as well. The message of good listening is pausing in one's own reactions and putting them aside for the moment in order to give full attention to all the cues from the other person.

Empathic responding skills are built on good listening. Empathic responding requires that the parent label and put into words the message(s) from the child which are empathically experienced by the parent. That is, the good listener allows herself or himself to feel the feelings and identify with the viewpoint of the child for the time being, sincerely attempting to experience the world in the way the child experiences it and to respond in terms of what was empathically felt. The parent tentatively labels the feeling messages and summarizes the content. Sometimes the empathic response is on target and will usually be acknowledged as such. Other times, inaccurate labels are used or the sense of the message was misunderstood. In these cases, the child responds in a way that furthers the understanding of both parent and child. Often, empathic responses are *continuing responses* in the sense that they invite the child to continue speaking, further clarifying feelings or exploring related ones. This promotes self-awareness and parental awareness of the child's inner being. The message of the empathic response is: "I am trying to understand your feelings and ideas, and I accept them as legitimate for you." Acceptance is the underlying attitudinal foundation for satisfying family relations. Emotional acceptance does not necessarily imply lack of disagreement or distinct points of view; it does imply recognition of differing feelings and ways of viewing the world and acceptance of the validity of differences.

"I-Messages"

Through the skill of sharing feelings, the parent expresses her or his own emotional reactions. Sharing feelings through the *I-message** has two effects. First, the parent explicitly labels the response as a personal one: I "own" these feelings, they stem from me, my needs and my perspective. Secondly, as a result, the parent remains nonaccusatory and nonjudgmental. In problem situations, the parent analyzes how her or his needs are being obstructed and frames the message in terms of those needs. In nonproblemmatic situations, the parent shares personal pleasure, pride, and so on in a way that tells the child that the parent really cares and is willing to give personal recognition. Opinions can be stated as "I-messages," as well, without the usual lecturing tone that often accompanies such statements.

Problem Solving Skills

When problems do occur or are likely to arise, the parent learns to apply decision-making skills to resolve them. *Anticipatory decision-making* (A-D-M) is really in itself a set of skills. The emphasis is on planning ahead, with equal stress on the *anticipation* and on the *plan*. The parent is educated to *think ahead* to events or situations coming up and to identify likely difficulties and preferred outcomes. Doing so requires good listening to their own feelings and their child's. Once the goals have been pinpointed, the parent decides on one or more strategies for attaining the goals. She or he is encouraged to include the child in the decision-making as frequently as possible. It is crucial for children to learn how to think about alternatives which are possible to act on in a decision situation, to identify the probable consequences of acting on the alternatives, and to base decisions on the satisfaction of needs and values with the least risk involved. Once a decision has been made, plans to carry it out must be made. Responsibilities are discussed and agreed upon and the plan is implemented. The message is cooperation, concern for each other's needs and preferences, and planning. The parent learns to be alert to the attempts of the child to carry out her or his responsibilities and to reinforce them.

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*"I-Message" is a term used by Thomas Gordon in his book Parent Effectiveness Training, New York: Wyden, 1970.

The emphasis of *positive guidance* is on clarifying expectations and preferences and stating them in clear, specific and positive terms: *what to do* rather than what not to do. What to do is elaborated beyond "Be good" or "Mind your manners, now." The parent is helped to specify what being good or minding manners means: "I would like you to play cooperatively with your sister, sharing the crayons and paper with her." The child is allowed to experience the *logical consequences* of her or his behavior, as well. Instead of a threat to punish, the parent may state the outcomes of different behaviors. Failure to share may bring about a tense situation in which the sister refuses to share her paints. Or, if that consequence is not a logical one in the situation, the parent may feel that a logical or related consequence for not sharing may have to be instituted. If health or safety is endangered by logical consequences, however, the parent imposes a *house rule* which sets specific boundaries for behavior. House rules are kept to a minimum and must be enforceable with related consequences. House rules, logical consequences, expectations, and encouraging words may be discussed regularly at a *family meeting* in which every member is actively involved in problem solving for the family. The parents are the clear guides, but are able to listen and respond to each child and to help them respond to each other.

Reinforcement, praise, and encouragement are additional aspects of positive guidance skills. The reinforcement of desired behaviors offers the parent and child many more benefits than does the negative reinforcement of criticism, nagging and other corrective responses.

Clarifying expectations and preferences is involved in *modeling* for preferred behaviors, too. The parent is encouraged to examine her or his own behavior to analyze whether the messages conveyed are consistent with their preferences and expectations for their children. If not, they are helped to consider how they might modify their behaviors to "send" the messages they wish to send. Modeling is addressed in terms of drug use and attitudes, but is meant as a generic skill for application in *all* areas of family living.

Direct teaching in teachable moments is also addressed in terms of drug use and attitudes, but it too is a generic skill pertinent to other areas of interest, including sexual development. Parents are taught to be alert to opportune times for sharing their feelings and beliefs about drugs of various kinds, their reasons for using or not using them, information about their effects and dosage, and so on. Further, parents are strongly encouraged to seek out information on drugs and their uses, especially with their children, and to help their children analyze it. There are many pamphlets, books, films, and related materials available to meet needs of different ages. Through the years of a child's development, the parent must consistently help the child to find useful information suited to the child's capabilities and to explore feelings and ideas regarding the information. Doing so should evolve out of *teachable moments*, times when the child raises a question or when the parent is using a drug which the child might be able to learn more about. Discussions about drugs and drug use must be based on all the skills learned in the CAPS program. Lecturing, preaching, or moralizing about drugs is ineffective and even counterproductive. Drug education in the family must occur in an atmosphere of acceptance and openness to ideas. The child must be recognized as an individual who will be making her or his own decisions regarding a variety of drugs at different points in her or his life: the responsible parent helps over time to teach good decision-making skills, helps in exploring values, personal feelings, and goals, and provides a sufficient information base with which to make choices.

Chapter Three
USING THE CAPS PROGRAM

Principles for Skill Training

Several principles have guided the development of the CAPS Program. First and foremost is the principle that *experiential learning* is necessary for learning new behavioral skills. Parents themselves are involved in thinking about, making and revising skill responses. The concepts which underlie the skills may be defined and explored, but the behaviors which compose the skills must be *practiced*. Indeed, it is not until the behaviors themselves are practiced that the concepts become real and meaningful. Experiencing the skills through practice not only shapes desirable verbal habits, but in a sense also commits the individual publically to using them. That is, it paves the way for the individual to use the skills in real life situations.

Practice in the group setting also permits the individual to receive immediate feedback regarding her or his verbalizations, tone of voice, choice of words, and so on as they manifest the underlying attitudes. Feedback from the group leader and from other parents informs the parent as to her or his progress in learning the skills. It provides reinforcement as well, a crucial dimension of learning for anyone, adult or child. Chapter Five provides some helpful guidelines about giving feedback.

The second principle is that the *leader's role is that of guide,* not expert. The leader has expertise in teaching the skills *per se,* but is not an authority who will provide answers to problems or counseling for specific people. Rather, the leader facilitates exploration of issues and concerns. She or he promotes group exchange on specific topics. Suggestions can be made by the leader regarding the utility of the various skills, but the parents themselves must arrive at a personal understanding of their use and should, over time, be able to recommend strategies to themselves and others. The leader is responsible for setting the cognitive stage by providing definitions and the rationale for learning particular skills and by structuring practice situations. As a guide, however, she or he must encourage parents to think through their own feelings and ideas with respect to the concepts and must provide constructive, encouraging feedback.

The third principle is that the leader also guides indirectly be being a *model* for parents. The leader models the skills and attitudes which are being taught, both in an unstructured and structured fashion. Structured modeling occurs most often when the leader introduces a new skill and demonstrates the verbal behaviors by role playing. The leader will probably offer examples from time to time, as well. However, just as in parenting, modeling by the leader occurs throughout each session in the leader's behaviors, in interaction with the group, and with specific individuals. Parents will observe the leader putting the skills to use fluently, appropriately, effectively and, above all, genuinely.

In structured modeling, the leader applies the fourth principle: *contrasting effective with ineffective responses*. The leader does this by giving examples. Particularly in presenting a new skill, the leader presents an effective example, an ineffective one, and then a second effective one. Following this, the leader asks for observations and comments regarding differences, including differences in impact or effect on the listeners' feelings and subsequent behaviors. Summarizing the points directly after the discussion allows the leader to review the important aspects of the skill and to simultaneously reinforce the parents' contributions. Concrete examples are pointed learning experiences. The leader should keep this principle in mind and apply it whenever possible.

The fifth principle is that as many examples as possible should stem from *real life experiences to demonstrate meaningful applicability and relevance*. Examples used throughout the program are drawn from experiences of past parent participants, leaders, and the authors themselves. Each leader should be alert to useful and poignant examples in her or his own family life and other experiences. As the group becomes more cohesive, parents will increasingly share personal examples. In addition, the home activities build in the use of personal examples.

Sixth, *generalization of the skills to real life situations* is encouraged. Generalization to family relationships is promoted first through the Home Activities. Parents are asked to apply each skill to one or more situations in their own families; these applications are discussed and reviewed in class, and successes are reinforced while difficulties are worked through. Generalization is also promoted through use of the *target child* concept and *goal setting*. This gives each parent concrete aims which help to root the concepts in reality. The danger with this is that they will not see the general applicability of the skills, but may misconstrue them as solely problem-directed. The leader must be alert to this possibility and counter it.

The leader actively and personally encourages "*experimentation*" with the skills outside the class setting. The general attitude is "trying it out--experiment with them" to be able to examine effects, difficulties and surprising (to the parents) successes.

Seventh, "experimentation" proceeds from the relatively *simple to the complex*, just as the skills are presented. Within sessions, as well, each skill is presented in gradual steps. This principle is consistant with the building block approach, basing learning upon relevant foundations. The process of learning, therefore, is reflected within sessions and in the progression of the program itself.

Lastly, the eighth principle is that *attitudinal changes will occur simultaneously or will follow from behavioral changes*. The thrust of CAPS is towards fostering acceptance, sensitivity to feelings, and a problem solving orientation towards family relationships. While it is true that attitudes are sometimes modified through intensive discussion, behavior change stimulates attitudinal changes. Because of this, the leader is strongly urged to maintain a *task-oriented approach* to conducting the group. Flexibility in responding to group needs and interests is desirable and necessary, but the primary focus is on learning and practicing the skills. The leader would be well off to structure each session at the beginning, giving a brief general outline so that the participants know what to expect. Consistency in following the structure within reasonable limits will promote learning and will discourage individual parents from focusing attention on inappropriate topics. The balance between sensitivity and willingness to listen to parents' feelings and being task-oriented is sometimes problemmatic. However, an experienced leader usually encounters little difficulty.

The Leader's Manual

CAPS is a nine session program divided into five units:

I. INTRODUCTION AND GOAL SETTING
II. COMMUNICATION IN THE FAMILY
III. PROBLEM SOLVING IN THE FAMILY
IV. DRUG EDUCATION IN THE FAMILY
V. CONCLUSION: ASSESSMENT OF GOAL ATTAINMENT

The introduction and conclusion involve one session each, while Unit II is three sessions and Units III and IV are two sessions each. Individual sessions focus on the review of a prior skill and the introduction of a new one. Session materials usually involve mechanisms for integrating the prior skills, but it is suggested that the leader promote further integration as it fits, so long as new skill learning is not overpowered.

An *overview* to each unit has been included. This overview provides the introduction to and rationale for the skills to be learned in that unit. The leader is encouraged to use this material in the way in which she or he is comfortable. Some leaders prefer to use portions of it verbatim in presenting the rationale to parents. Others prefer to rephrase the essential ideas and perhaps add their own thoughts where relevant.

Each session is organized in a systematic fashion. In order for the leader to have a clear understanding of session intent and method, specific aspects of each session are presented and discussed. Following a brief *introduction*, the *goals* are presented. These are broad statements of intent, useful as guides to the overall purpose of a session. *Behavioral objectives* are presented next. These are specific behaviors, statements of what each parent has to say or do to demonstrate learning of the skill, concept, or attitude. Behavioral objectives vary in their scope and concreteness, but generally are signs that learning is occurring or has occurred. They are a useful guide for goal attainment which the leader should work toward and look for.

Key concepts are presented next. These are included as important summaries of the main conceptual skills, attitudes, and relevant ideas which the program seeks to enhance. On occasion, concepts which are counterproductive (e.g., physical punishment) are included so as to clarify their meaning in the context of the CAPS program. *Principles to emphasize* follow. These are intended as a useful summary of the main points of the rationale; these principles usually outline the component steps for the skill to be taught, as well.

Materials needed, leader preparation, and *general format* are reviewed. Materials needed points out needs for particular practice sheets, blackboard, and so on. The leader will probably wish to add to the list. Leader preparation usually requires active consideration of the sessions' procedures, rationale, concepts, and principles. Preparing to give the rationale and to define the concepts fluently takes practice and review. The principles should be easy to relate to the parents, with added examples and commentary. Leader preparation sometimes calls for constructing class materials, such as 3 x 5 card situations for role play. Other times, it may involve locating and arranging for materials, such as a film. It is usually recommended that the leader complete the Home Activities assignment so as to be familiar with parents' responsibilities in the program and to become sensitive to likely areas of difficulty. Giving feedback to the Home Activities of the previous week is a major task of the leader and a most important one. It is through feedback, that is through reinforcing effective responses and suggesting alternatives for less constructive responses, that parents learn the skills. Written feedback is meaningful to them and should be taken seriously by the leader. It is an opportunity to "give strokes" while shaping increasing skill effectiveness. Lastly, leader preparation involves "household" or management functions: arranging for a meeting place, seeing to it that the doors are open early enough, arranging chairs to facilitate groups interaction, closing up, and so on. While most early arrivals generally enjoy helping to set up, it is the leader's responsibility to see to it that all necessary arrangements are made and carried out. General format provides a very brief outline of the sessions's procedural content.

Session procedure is presented next. Each session follows a similar organization intended to provide a structured and effective set of learning experiences. Each session has been designed to take two hours. The main emphasis is on practice and much class time is spent on activities which provide for experiential learning. The following basic format is characteristic of each session:

1. Review of the previously practiced skill through discussion of the Home Activities.
2. Introduction of the new concept.
3. Modeling of the skill by the leader, including modeling of contrasting ineffective responses.
4. Discussion of examples and of effects of the contrasting responses.
5. A series of verbal and written practices exercises, using practice situations and parents' own experiences.
6. Feedback from the leader and other participants.
7. Role play of the skill(s) by the participants to practice appropriate use and interpretation.

8. Feedback and discussion.
9. Summary of the session's highlights and preview of the topic for the next session.
10. Assignment for next session.

This format provides the basic structure. Each session is somewhat different, depending upon the complexity of the skill and the number of concepts involved. Later sessions in particular tend to involve several major skill components which require individual introduction and practice first before they can be integrated into the general skill. It is suggested that the leader review the procedure and *estimate amounts of time* to be spent on *each* activity. Maintaining some schedule will be helpful in task-orientation. If a particular activity seems especially valuable, it may be extended or repeated. On occasion, leaders may wish to *add a session* based on the time they desire the group to spend on a set of activities. If the parents agree, doing so is encouraged.

Additional Suggestions are included when relevant. They are intended to alert the leader to possible alternatives and to potential needs, reactions, or pitfalls encountered in earlier implementations of the program. These suggestions are offered as options for the leader to use, if possible or desirable. Leaders will develop their own, as well, as they implement the program. Lastly, a short section on *Resources* is presented. These are suggested readings which the leader may find helpful or interesting.

The Parent Workbook

The *Parent Workbook* contains readings parallel to the leader's material for each skill. In the readings, the main concepts are presented. Major principles are generally described but are not presented in entirety. The leader should read both the overview in the *Leader's Manual* and the parent reading in the *Parent Workbook* to prepare for each session. Also contained in the *Parent Workbook* are *Home Activities* designed to give further practice in skill application and to extend transfer of the skills to family interaction. Examples of constructive feedback to parents Home Activities exercises are offered in Chapter Five. Developing more accepting and empathic attitudes toward their children's feelings and needs is an underlying goal. These goals are accomplished through:

1. Readings to introduce and stimulate interest in the new concepts.
2. Discussion (25% of class time) of the concepts and experiences relating to them.
3. Skill training (75% of class time), including definitions of skills, solicited examples, modeled examples, verbal and written practice exercises, and role playing.
4. Modeling of effective responses by the leader during discussion as well as during skills training activities.
5. Deliberate strategies, such as reinforcement, classification and facilitative confrontation to promote the most effective learning of desirable behaviors and the extinction of less preferred responses.
6. Home Activities to structure and promote response learning and generalization.
7. Attention to the effects of group formation and group process on learning.

Through this process, CAPS shapes parental behaviors and attitudes which best communicate an understanding of and respect for a child's viewpoint while simultaneously discouraging behaviors which fail to do so. Parents learn to respect their own feelings, as well, and to arrive at resolutions of conflicts or potential conflicts through constructive self-structuring and relationship skills.

Chapter Four

GUIDELINES FOR GROUP LEADERSHIP

Arrangements

As mentioned earlier, CAPS is typically run once a week for nine weeks, each session lasting two hours. Other scheduling alternatives are possible, though it is generally believed that for maximal impact the sessions ought to be experienced in relatively close proximity. Scheduling the program will depend upon characteristic needs and preferences of the potential participants. Generally, when couples are enrolling, evening sessions are preferred. Evening sessions tend to be preferred in general by working people. However, on occasion, mother's groups have been run during the day. Whichever time of day is chosen, allowance for appropriate two-hour blocks of time must be made. Sensitivity to travel time and timing of meals are factors as well.

The leader's professional commitments will also determine scheduling flexibility. In running educational enhancement groups in a school, community, mental health center, clinic, or community organization setting, leaders will find differences as well vis-à-vis the availability of the parents and the facilities. A period of experimentation is generally required to arrive at mutually suitable scheduling.

People interested in participating in CAPS groups come from diverse settings. Much interest has been demonstrated by parents reached through Parent-Teacher Organizations in public and private schools. Some PTO's desire to set up ongoing programming in cooperation with a free-lance leader or a community center. Parents who participate in various community organizations, such as Junior Women's League, Rotary Club, or churches are often interested in the CAPS approach. Many community agencies, as well, desire to establish parent education groups in the community. CAPS may also be run in clinics and in community mental health centers, offered to clients and to the general population as an aspect of the center's consultation and education activities.

Selection of Group Leaders

CAPS groups may be run with a single leader or with co-leaders. Co-leaders have been quite effective when they have worked out a compatible leading style together in which both are perceived as equals. Co-leaders have the advantage over single leaders of being able to develop suitable modeling strategies and role plays ahead of time and of being able to share responsibilities and feedback to group members. The most effective pairing seems to be one female and one male leader, since both provide different perspectives. Moreover, they seem to be viewed as respective allies by female and male participants, thus providing an element of indirect support. Single leaders, particularly those who are themselves parents and who are experienced in group leadership, maintain the advantage of not having to arrive at a sometimes complex working relationship. Single leadership allows greater control over the structure and process of the group.

Co-leaders may also be drawn from parent graduates of CAPS. This "pyramid" approach has been successful in several instances. Many parents who participate in the program become most enthused about the program, and a number of them become interested in continuing their involvement. Positive responses to leader solicitation have been frequent. Leaders ought to be alert to those who not only have the excitement to remain involved, but who are also likely to have the skills to do so with sufficient leader support.

Skills for group leadership as well as competence in the CAPS skills are useful. Some parents have led groups in other contexts, while others may be able to learn through discussion and experience. Developing group leadership skills is a lengthy process. The leader defines and structures the groups in CAPS. She or he (they) must simultaneously be able to take the roles of facilitator of discussion, initiator of activities and new discussion, information-giver regarding new concepts and skill practice, coordinator of group efforts, and procedural technician responsible for the "household" tasks involved in implementing groups.

Group leadership skills reflect a sensitivity to group composition and needs. Groups composed of all couples, all men or women, or unattached and attached parents together have somewhat different needs, interests, and points of view. Effective leadership involves awareness of possible needs and alertness to others which become apparent.

Sensitivity to group process is especially important. While CAPS groups are more similar to classes than counseling or therapy groups, their very nature as intensive, small group experiences inherently involves greater participant interaction and relationship development. It is necessary to develop the ability to identify and facilitate various stages in group development and to work with individual and group members exhibiting different group roles. For example, "the critic" is often difficult for other group members to live with. She or he deflates the group and/or undermines the learning process if excessive and nonconstructive criticism is forthcoming. Learning to respond to appropriate criticism, to reflect back personal concerns involved in the general comments, and to table other comments is an important aspect of leading the group.

Similarly with those who become known for giving or seeking opinions, evaluating the group's progress, initiating new issues, affirming groups goals and purpose, mediating conflicts, following others, seeking recognition, dominating group attention (or the leader's, more commonly) and so on: all these *group role behaviors* are common and perhaps necessary for group progress and development. Leaders must be able to recognize and use them facilitatively, without becoming defensive or inhibited. Generally, the leader who makes use of open-ended questions, good listening, and empathic responding is one who facilitates group progress. Leaders help develop an atmosphere of trust and confidence among group members through warm, concerned behavior, nonjudgmental interest in members feelings and ideas, and sufficient and appropriate self-disclosure.

The latter, appropriate self-disclosure, is particularly important in fostering a personal sense of commitment to the leader and the group. Two sorts of disclosures are common. First is sharing feelings which are occurring during the process of the group. This lets the group know the leader's reaction to various aspects of interaction, learning, and group progression. It also gives the leader an opportunity to restructure group direction if necessary. Secondly, self-revealing disclosures about personal experiences and problems are meaningful to group members. Such disclosure should only occur if the leader is comfortable with sharing these experiences and if they are relevant to particular points. A good leader is one who is aware not only of group members, but also of her or his own affective reactions [illegible] the ongoing situation and is able to aptly express them and share personal experiences in the teaching situation.

In summary, leading CAPS groups involves many of the same skills and behaviors as leading other groups. The aim is twofold: to help the group develop a sense of identity and to educate group members in specific skills.

Facilitative leadership results in group members listening to each other with interest and attention, involving each other in discussion, supporting each other, and helping each other to deal with conflicting points of view. Openness, trust and goal achievement are the hallmarks of a successful group.

Chapter Five

HOME ACTIVITIES AND FEEDBACK

The Home Activities are an important learning and generalization practice aspect of the CAPS program. It is through these assignments that the parents begin to *translate* what they learn in the course *into actual parent-child interactions* in the home. Unless the parents use the parenting skills with their own children, the program will be a waste of their time. But they need help and encouragement in beginning to use the skills with their children.

Home Activities are the vehicle for putting the parenting skills into actual use at home. Through these planned assignments, the parents can try out the new skills with their children and report back their experience and concerns. The role of the leader is to provide constructive *feedback* on the actual Home Activities papers so that the parents may further refine and analyze their parenting skills.

While the leader should consistently provide encouragement or helpful suggestions in the classroom setting, it is mandatory that the leader *faithfully* and *regularly* collect the Home Activities each week, review them, provide feedback and return them *promptly* the following week.

The leader is also encouraged to keep a "Home Activities Record" of home activities completion. Whether or not a parent regularly completes the activities is often an indication of commitment to learning the new skills offered in the CAPS program. In addition, the keeping of records communicates to the parents that they are indeed expected to try out the skills in the home setting.

Here are some examples of feedback that will help you to give similar helpful feedback to your class.

Example 1

Directions: Write an empathic response to the following statements made by children.

1) "I hate Judy. She says that I don't play jump rope the right way and that I can't play anymore!"

Parent 1 - "You're upset that Judy won't let you play."

Leader Feedback - *Good empathic response: you chose an accurate and moderately toned feeling word and put it in context.*

Parent 2 - "Judy won't let you play any more and you hate her."

Leader Feedback - *Good content summary response - Next time try to re-phrase the feelings expressed.*

Parent 3 - "Sounds like you're really angry at Judy for leaving you out of the game."

Leader Feedback - *Very good empathic response: you captured the essential feeling and its basis.*

2) "Why can't I get any new clothes like Susan. I always have to wear the old stuff. Being the youngest is no fun."

Parent 1 - "Don't feel bad. You get other new things that Susan doesn't get."

Leader Feedback - *This response denies the child's feelings, even though it may be true that she gets other new things. A more effective and empathic response would be: "You feel bad because you wear Susan's old clothes." Then continue to explore the feelings, the needs, and the reality. Identify feelings first.*

Parent 2 - "You wish you could have some new clothes, too."

Leader Feedback - *Good empathic response.*

Parent 3 - "Maybe we can buy you some new slacks next week."

Leader Feedback - *This response is a solution rather than an emapthic response to the child's feelings: Identify feelings first.*

Example 2

Directions: Write what you think should be done to solve the following problem. There is no absolutely right answer. You should use any one or a combination of the communication and problem solving skills that you have learned. Try to label the skills that you would use.

Situation: Eight year old John very much wants a pet rabbit. You are willing to consent to this if he will take responsbility for its care and feeding. But you also know that he may not really know how to give the rabbit the proper care without some guidance. What will you do?

Parent 1 - "I wouldn't let him have the rabbit until he is older."

Leader Feedback - *This is an indication of your feelings about the situation, but it does not address the situation directly. Pretend, as in the example, that you are willing to do so under certain conditions: please redo this example and turn it in again. It's good practice for A-D-M skills!*

Parent 2 - "I would help him get books from the library to learn more about the care and feeding of rabbits. (Planning ahead) I would try to make an agreement about who is going to feed it every day--he is--and try to establish a regular time each day so that it becomes a habit and part of a regular schedule." (Advance planning)

Leader Feedback - *Excellent* A-D-M *response: clear, specific, and you involve the child in the process.*

Parent 3 - "Since he is only eight I'm afraid he will forget to care for the rabbit after the novelty of it wears off. I guess I am willing to tolerate his forgetting a few (3 or 4) times but if he forgets regularly I would not be willing to keep the rabbit. We would have to get rid of it." (Logical consequence)

Leader Feedback - *Your response is a good I-message and identification of your own feelings. That is one part of the A-D-M process. You also correctly spell out the logical consequence. You have not yet discussed how to use other skills and steps in A-D-M to avoid or head off the situation you fear will occur. How can you plan ahead? Redo this example and let me see it.*

Use the Home Activities to encourage and reinforce the parents' efforts. Feedback is a useful way for you, the leader, to communicate personally with each parent. Here are additional examples of things you might write on the Home Activities papers.

1. Good work.
2. Great
3. I like that.

4. Accurate identification of his feelings, good!
5. Try to say how you feel about the situation. I feel .... when ....
6. Can you think of other possible alternatives?
7. Good use of A-D-M. Keep it up!
8. I can tell that you've given this careful thought. Can you try it with your child?
9. Keep up the enthusiasm--I'm pleased with how hard you work at these skills. It will surely pay off.
10. This shows genuine understanding of your child's point of view.
11. Try to be more specific--the clearer the directions the more likely that they will be understood and followed. I'd suggest: "When you take off your coat, you hang it on the hook in the closet."

Some Principles of Good Feedback

1. It is *specific* and *clear* rather than general.
2. It is *timed appropriately*. Give it when it is most useful and when the parent can learn from it.
3. It is *descriptive* of a behavior rather than evaluative.
4. It is focused on things that the parent *can do something about* or *can change.*
5. It is constructive and helpful in a *positive* way rather than being an emphasis upon what is wrong.

UNIT I

INTRODUCTION: SETTING GOALS

Introduction and Goal Setting

OVERVIEW

There is much psychological and sociological research and theory containing descriptions of important ways in which family style and parents themselves shape attitudes, behavioral choice patterns, and the interpersonal sensitivity and competence of their children. The fundamental concept for primary prevention is that a child's development is tightly interwoven in the fabric of the family's way of being: if certain favorable patterns of family interaction can be further enhanced or can be developed, the child's development will be enhanced. Moreover, it is less likely that serious psychosocial problems will arise. Substance dependency seems to be one of those problems which can be prevented or at least lessened through enhancing family relationships. All families, including those with already positive relationships, can benefit from enhancement programs. The basic goal, then is to help families promote the mental health of their members. In so doing, they will decrease the development of substance dependent life styles, be it dependency upon alcohol, tobacco, marijuana, or narcotics, and other destructive or worrisome patterns of living.

Parents' Influence on Children

Two major sources of influence seem to relate to specific influences parents have on children's psychosocial development and abuse behaviors: modeling and interpersonal style. Parents are significant models for their children: children tend to observe, interpret, and adapt their parents drug use styles as well as their interpersonal styles and other aspects of personality. Modeling is a particularly potent mode of learning for children. Specific research evidence has been found which indicates that children learn drug use styles and attitudes from their parents although their parents seldom actively or intentionally teach those things. Children's use of legal, socially accepted drugs such as liquor, cigarettes, caffeine, sleeping pills and tranquilizers is directly related to parental use, through modeling. Research suggests that when parents habitually use a number of these drugs, their children are more likely to become multiple drug users, which may also include use of illicit drugs, such as marijuana, hashish, and the more dangerous barbiturates. The implication of these findings is that parents should be helped to recognize their role in fostering their children's drug-related attitudes and behavior. In particular, parental modeling and its impact must be stressed in educating parents about the effects of their attitudes and behavior on their children. Parents can be helped by instructing them in ways to make their intent consistent with their actual messages. The concept of modeling for positive and valued behaviors and attitudes is therefore stressed in this *Communication and Parenting Skills* (CAPS) *Program.*

The second source of influence is broader: *parents' interpersonal and family communication styles* seem to affect the child's intra-and interpersonal development in ways that are often significantly related to substance dependency or at least substance use in their children. Certain weaknesses in family communication patterns and family relationships seem to be consistently associated with high risk of abuse and/or poor psychosocial adjustment by children.

Relationships of Family Style to Drug Use

Research suggests that poor family relationships, interpersonal hostility, faulty communications, and perceived or actual parental indifference are related to increased vulnerability to misuse of drugs. The work of Blum[1] is especially relevant. In a major research project, Blum and his associates analyzed the communication and interaction patterns of families identified as being at low or high risk of encouraging substance dependency. Experienced psychotherapists assessed differences between families of children who were using or were likely to use drugs (High Risk) and those of children not using and unlikely to use drugs (Low Risk). Their findings are instructive. The following is a brief summary.

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[1] Blum, R. H. and Associates. Horatio Alger's Children. San Francisco: Jossey-Bass, 1972.

High Risk families were observed to be rigid and to demand conformity to parental values. Parents in these families did not permit opportunities for independent decision-making by their children. They were, at the same time, distinctly unsupportive. In most observed interactions, the parents were punitive or indifferent to their children. Very little basic trust seemed apparent between parents and their children in these families. In contrast, Low Risk families consistently demonstrated nurturance and affection. They encouraged the expression of emotion. Further, children were permitted a wide range of individual expression in decision-making and behavior. Communication was clear, confronting, respectful, and understanding. Emotionally difficult situations were confronted rather than ignored or punitively dealt with. Low Risk parents were described as confident and comfortable in their roles, able to give love and to establish an egalitarian family climate. Parental leadership was strong, but it did not overpower the children's development of autonomy as unique individuals.

Perceived if not actual lack of parental concern, alienation among family members, extreme parental dominance or extreme laxness, and problem avoidance are therefore associated with youthful drug misuse. Another psychologist, O'Dowd,[2] suggests that such family interaction predisposes a child towards involvement in peer group activities for fulfillment of basic needs rather than for satisfaction of supplemental developmental needs. If the peer group is involved or is experimenting with alcohol, barbiturates, cigarettes, marijuana, heroin, or other drugs, the child is more likely to become deeply involved if the family climate and interaction is negative or at best, lax or neutral. In contrast, family interaction characterized by cohesiveness, openness of communication, and parentally encouraged autonomy seem to foster greater interpersonal competence and self-affirmation in children and are less often associated with abuse. The implications of these findings are twofold. First, parents should be helped to develop good listening skills so as to be capable of listening attentively to their children. To foster the development of a child's self-concept, the parents must convey their interest and concern for the child as a person. Second, parents should be helped to use constructive communication patterns which encourage their children's development of autonomy and self-reliance while simultaneously allowing for the consideration of parents' needs as well. Teaching the use of "I-messages" and anticipatory problem-solving strategies are among the skills which parents can effectively promote and thus increase responsible autonomy in the child.

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[2] O'Dowd, M. M. Family Supportiveness Related To Illicit Drug Use Immunity. Unpublished doctoral dissertation, University of Maryland, 1973.

Drug Experimentation

These positive family characteristics may, however, be associated with short term experimentation with one or more drugs, especially marijuana, and with recreational use of drugs in social settings--liquor or marijuana in particular. Experimentation under these circumstances tends to be viewed as a positive sign of healthy psychological development, an indication of healthy risk-taking and exploration of one's world. We are not suggesting that such experimentation be encouraged; on the other hand, it need not be feared. There is no evidence that experimentation with liquor, marijuana, or cigarettes leads to abuse of narcotics or barbiturates, despite the widely held myth.

General positive psychological and interpersonal development is related to the same family patterns as low risk. Families in Blum's Low Risk group, for example, exhibited much nurturance and affection and encouraged the expression of emotions. It is important to stress this concept to parents: not only will parents be decreasing the likelihood of serious substance abusing life patterns developing, but they will *simultaneously be promoting healthy, satisfying development*--the goal that most parents share. Moreover, by learning and habitually using effective communication and parenting skills, such as taught in the CAPS program, parents may well *enhance their own interpersonal development*. These skills are the bases for satisfying, close relationships whether with children or other adults. The underlying attitudes--especially the empathic acceptance of feelings, genuine concern, and attentiveness--are the keys to developing and maintaining fine interpersonal relationships and are best demonstrated through fluent adoption of the skills in everyday encounters.

SESSION 1

THE IMPORTANCE OF QUALITY FAMILY RELATIONSHIPS

I. INTRODUCTION

This first session is important, for it is the session in which you as leader provide the conceptual and affective foundation for the skill training to follow. The crucial thrust of the first session is to demonstrate to parents and convince them of the importance of quality family life, the related positive psychosocial development of the child, and the prevention of substance dependency.

Parents need to understand the relationships between family life and the development of substance dependency (drug or alcohol abuse). Partially as a result of their understanding but mainly as a result of their enhanced parenting skills and attitudes, they will be able to effectively undertake their role in promoting a healthy, satisfying environment for growth and learning.

II. GOALS

A. To develop a sense of group identity and initial group cohesiveness.

B. To help parents understand how the course can enhance the family--both for children and for parents.

C. To help parents understand the relationship between quality family relationships and prevention of substance dependency.

D. To help parents identify and define their own goals for change in their families.

III. BEHAVIORAL OBJECTIVES

A. Parents will discuss how this course may be able to help them as a parent.

B. Parents will share their experiences by citing examples of problems or concerns they have in their relationships with their children.

C. Parents will identify what they would like to change or improve in relationships with their children, the target child in particular.

IV. KEY CONCEPTS

A. Parenting

1. The task of being a parent, a responsible caretaker for a dependent child.
2. Attending to the emotional, social, and physical needs of the dependent individual in affective, nurturant ways.

B. Family Communication

1. The specific interactions and ongoing interaction among the various members of a family.
2. The sharing among family members of feelings, thoughts, ideas, opinions, and reasoning about issues and mutual concerns.

C. Nurturance

1. Support and encouragement given by one person to another.
   Example: Physical affection, pat on the shoulder, a smile, back rub, encouragement--"Good work," or "I knew I could trust you."
2. Promotion of a growth facilitating environment which provides warmth, support, and encouragement as well as appropriate challenges for optimal psychosocial development.
   Example: Writing down a schedule so child knows what is expected, providing music lessons for a musical child, going to the little league game, listening to your child read to you.

D. Development Enhancement

Guided promotion of existing and potential life skills (intrapersonal skills, e.g., decision-making skills and interpersonal skills, e.g., friendship skills), attitudes, and interests to attain optimal psychosocial capabilities; helping a child to learn skills and patterns of living which allow her or him to reach full potential.
Example: Allowing child to make some decisions alone, helping shy child invite friend over to play, encourage child to express feelings and opinions to others.

E. Primary Prevention

Any approach or group of approaches which have the aim of enhancing the life-coping skills and attitudes of the individual, family, and/or community and which therefore lead to greater satisfaction, increased options in living and more effective problem-solving abilities. Simultaneously, there should be decreased likelihood of developing severe problems in living, including substance dependency.

Example: This parent education course, organized school sports, planned camping experiences, work-study program, self-concept enrichment programs in schools, decision-making skills training for children.

F. Substance Dependency

Inordinate and consistent reliance on chemical substances (e.g., alcohol, nicotine, caffeine, marijuana, barbiturates, heroin, and hallucinogens) which interferes with the individual's life pattern and goals and which can lead to the adoption of a different life style incorporating the dependency as the central focus and necessary part of the life style.

G. Target Child

The child chosen by the parent to think specifically about during the CAPS program and to practice the skills with in particular. Focusing on one child is easier in first setting goals and practicing then having to practice on all children in the family.

H. Goal

The identification of specific behavior change toward which the parent would like to work for and try to achieve. This behavior can be the child's or the parent's.

I. Goal Setting

Identifying a target behavior to change and committing one's self to work toward achieving that change. It is stating what you wish to accomplish.

V. PRINCIPLES TO EMPHASIZE

A. Parents create the family's social-emotional *atmosphere* and can influence it in both constructive and destructive ways. Informed, skilled parents are likely to be more planful, consistent, and constructive.

B. Parents are important and powerful *models* for their children in both behaviors and attitudes.

C. If certain *favorable patterns* of family interaction can be developed or furthered, as through the application of particularly constructive parenting and communication skills, then the child's healthy development will be facilitated.

D. The establishment and further enhancement of favorable, low risk family interaction patterns will *decrease the likelihood of serious problems developing* such as substance dependency.

E. *All families*, including those with already positive relationships, *benefit from enhancement programs*. Each learns, adapts, and internalizes the ideas, attitudes, and skills according to their needs and capabilities.

F. In order to best promote *positive self-concepts* in children, parents need to be able to be good listeners and to attend to each child as a *unique, worthy individual* in her or his own right.

G. For the development of *responsible self-reliance* in children, parents need to be able to *guide* rather than rule. Anticipatory problem-solving skills and the use of logical consequences along with good listening facilitates this development.

H. Parents have needs and interests too. They must *help their children to understand and respect their needs and feelings*, as well as those of others. Sending clear, honest "I-messages" is an important source of developing such understanding and responsiveness.

I. Many parent-child conflicts are based on *faulty expectations* by parents. Parents often forget or are unaware of the need to *match developmental capabilities* of the child--cognitively, physically, socially, morally, emotionally--and their own expectations. Parents tend to expect a child to act like a miniature adult rather than a growing child. What a parent views as a misbehavior is frequently *not misbehavior at all* rather, it is inadequate behavior resulting from the child's *lack of developmental readiness* to understand and/or carry out what the parent wishes.

J. Most children go through typical behaviors at various stages. *Knowing what to expect* and realizing that "*This too shall pass*," are helpful concepts for parents and facilitate greater acceptance of the child by the parent. Understanding development comes from sharing experiences and observations with other parents and from reading about development. The leader should recommend resource books to parents and encourage them to pursue such learning. See list of Resources, page 54.

K. *Wide Age Range* - While an understanding of the general patterns of child development is important, there is still a wide age range within which children grow. Some are early developers in particular areas and later developers in others.

L. *Setting goals for yourself* in making changes in behavior or relationships is important *in developing new skills* and in helping to *foster satisfying relationships*.

VI. MATERIALS NEEDED

A. Paper, pencils.

B. Name tags and straight pins.

C. Beverage(s), refreshments.

VII. LEADER PREPARATION

A. Prior to starting the course, the leader must be thoroughly familiar with the program content and procedure, and must have had experience in leading parent groups or similar groups in communication skills training. In addition, an understanding of development at different stages would be helpful. At the start of the first session, a complete review of the CAPS program is strongly urged.

B. Review the format for the first session. Look over the course outline and prepare to present an overview of the course, its rationale, and its goals. Estimate amount of time you will spend on each activity.

C. Arrange chairs in a circle and prepare the coffee/tea, etc.

VIII. GENERAL FORMAT

A. Introductions

B. Overview of the CAPS Rationale

C. Presentation of Class Guidelines

D. Parent-Child Relationships

E. Summary and Home Activities

IX. SESSION PROCEDURE

A. Introductions

1. Greet participants at the door, introducing yourself and giving out name tags and pins. Ask each person to write their name in large block letters on the tag. Invite each parent as she or he arrives to join in the circle; introduce newly arrived members to others already there. Your friendliness and warmth in greeting them and running the session will do a lot to encourage friendliness in the new group.
2. The Name Game
    a. Purpose. This game is designed to help group members learn each other's names and to "break the ice." It is a fun game as well as an informational one.
    b. Procedure. The leader begins by introducing her- or himself again and by telling the group how to play the Name Game. Explain that its purpose is a way of introducing people to one another. The first person (the leader) says her or his first name (e.g., Sue). The second person repeats the first person's name and then gives her or his own name (Sue, Jim). The third person repeats the names of the first two people and then states her or his name (Sue, Jim, Scott). Proceed around the circle until all parents have had the opportunity to do it once. It becomes more difficult and more humorous at the end of the circle. For added fun and to show that you are a good sport, the leader should take another turn as the last person, and repeat all the names.
    c. Repeat. Play the game again: vary it by going around the circle in reverse direction. It will reinforce the learning of names, add more laughs and facilitate a relaxed atmosphere.
3. Sharing Information
    a. In order for you and the parents to get to know each other have parents give the names and ages of their children and ask them to tell the group why they want to take the course and what they wish to get out of it. You will probably want to tell the group a bit about yourself, your family, and your interests as well.

b. It is most important that you attend closely to this, to become familiar with personal information and needs and to be able to respond appropriately to specific parents at later points during this first session and at other points in the course. You may wish to jot down some of the information; if so, do it inconspicuously and explain that you would like to be sure to recall what has been mentioned. Another alternative which many leaders find useful is to have information sheets already available and request that parents complete them for your information: parents' names, names and ages of children, address and phone, and perhaps a sentence or two about expectations.

c. Use this information to provide a class roster which you will give to the group during Session 2. With that information, they will begin to feel more like a class and will be able to call upon each other as needed or interested. Encourage some interchange among group members between sessions. The roster should include names, addresses and phone numbers.

B. Overview of CAPS Rationale

1. Orientation to the Course Itself

a. Go over the CAPS outline: while you are doing so, it would be helpful for parents to view the course outline in the *Parent Workbook* (page i). Go over each session briefly. explain the meaning of each title, give one or two examples of each skill, and point out how the skills can be useful with their own children.

2. Course Requirements

a. Faithful Attendance. Parents are expected to attend every session for their own benefit and for the group's. Each new topic is related to and built upon the preceding concepts, so for an individual to miss some meetings will be self-defeating: the building block method of learning requires faithful attendance. The groups will also suffer a loss if participants miss a session, for each parent has valuable insights and experiences with the new skill learning and it is most helpful to share those experiences and the perceived changes. Thus, the expectation is that all parents will attend every class, except in unavoidable circumstances. Should it be unavoidable, the parent should notify the leader.

b. Home Activities. A Home Activity is assigned to encourage further practice in new skills and to insure practice in "older" skills in accord with the building block concept. It is to be completed at home and turned in the following week, after the class has discussed it. Your task as leader is to read and comment on the completed home activity and to return it to parents promptly the next week: parents need as much constructive feedback as possible. The home activity comments are a powerful vehicle for feedback and helpful suggestions. Chapter Five, *Home Activities and Feedback*, offers ideas for carrying this out.

c. Practice at Home. The CAPS program is designed to provide parents with practical ways to make changes at home with their children. As the parents learn the new skills, they will feel clumsy and uncomfortable. Practicing the skills both in class and at home is very important in order for the skills to become a natural part of the parenting repertoire. You as leader must suggest ways to practice at home: some such practice will be included in the homework, but much will rely on your on-the-spot recommendations or assignments. Let the class know you will be doing this.

d. Confidentiality. Be sure to stress the importance of keeping confidential all information and feelings disclosed in the class. As parents begin to find that other parents have similar frustrations and experiences, there occurs an increase in the self-disclosure of personal experiences. Trust, engendered by the sure knowledge that people will keep those disclosures confidential, is the basis of a close, cohesive, and active group.

3. CAPS and Substance Dependency Prevention. Discuss in your own words the rationale given in the introduction to your manual, in the introduction to this session, and in any reading or courses you have completed which have relevance to the concepts and methods of primary prevention.
   a. Elicit ideas from the group, to reinforce your points and to make a "natural" case for the course. Ask parents for their ideas about quality family relationships and interweave their ideas into the rationale.
   b. Stress two major points: CAPS skills as relevant to healthy, satisfying family and child development and as relevant to substance dependency prevention. Bring in the key concepts and essential principles.

C. Presentation of Class Guidelines

It is important to acquaint the class with the following guidelines which set the tone for free and open discussion of concepts and issues. The thrust of the message is this: that no one, including the leader, is all-knowing and that all participants have the right and the obligation to share and explore their thinking with others. The tone to take in presenting these guidelines is that of sharing your feelings about how you would like the group to run rather than a didactic recitation of rules.

1. *The leader does not have all the answers.* While the role of the leader is to be a skill trainer and group facilitator, the goal is to help parents to find solutions appropriate for them personally. Stress that you, as the leader, have knowledge about how to teach parenting skills but that you do not know everything about all ages and developmental needs of children. Discourage parents from looking to you to tell them what to do in problem situations. You must take care not to set yourself up as the authority knowledgeable with all the right solutions. One of the most effective ways to discourage being positioned as the highest authority is to reflect the questions and concerns back to the group: open up opportunities for feedback and problem-solving by the parent, her- or himself, and by other parents.

2. *No one is an expert on everything.* Be sure to stress the fact that everyone is learning, and that learning goes on constantly throughout one's development, over the life span. Therefore, no one is an expert on everything although every person, including the leader, has something to offer the group in certain areas. But, again, no one has all the answers. Be careful not to allow yourself or anyone else to take the role of expert. If one or two group members appears to be responding to each concern raised, and particularly if the responses are given in authoritative and moralistic ways, it will be necessary for you to deflect the developing pattern.
3. *There are no right or wrong answers.* Stress, to yourself and the group members, that value judgments on people's feelings and ideas are out of place in the CAPS Program. That is, each person's remarks will be closely listened to and explored, rather than evaluated for their "rightness" or "wrongness." Respect for each person's feelings and ideas is the hallmark of the class--just as it is the keystone to the parent-child relationship. The goal is to encourage all parents to participate in class discussion and practice activities, so it is important to respect all remarks. Certainly, it is useful for the leader or others to suggest alternatives or other ways of thinking about the same issues; but, be sure to communicate that the norm is respect for all views as demonstrated by good listening and appropriate "I-messages." You, as the leader, are the model.
4. *All feelings are acceptable.* It is important to convey the message that all feelings are okay, whether positive or negative. Empathic acceptance of all feelings expressed or otherwise communicated is the foundation for the success of the program. You, as leader, have the major responsibility of fostering the atmosphere of genuine concern and acceptance. Again, the leader is the model.
5. *Education, not therapy.* The process is an educational one rather than a therapeutic or problem-solving one. Parents frequently bring up specific problems and concerns, and the group can be very helpful in thinking through the issues. However, the

major purpose of CAPS is not to problem-solve or to counsel, but to educate parents in important new skills which they can use to resolve many of the problems which arise and also which promote a general, favorable family environment. Moreover, CAPS is run for the educational benefit of all members, not for a few. Therefore, no one, two, or even three group members should be permitted to become the center of attention, especially for purposes of raising personal problems. Some discussion of specific problems is, of course, necessary to provide relevant examples for skill applications. But by and large, the problems brought up should focus on successes and difficulties in specifically learning to use the skills.

D. Parent-Child Relationships

1. Discuss briefly what parents expect in their relationships, and their concerns and difficulties in being effective parents. Include the following points:
   a. Life with children has many small frustrations.
   b. Conflicts and differences among family members are inevitable because each person is a unique and different individual.
   c. Conflict and differences of opinion in themselves are not "bad;" they are normal and to be respected. It is how they are dealt with that makes the difference.
   d. No one is perfect. Both parents and children are humans who sometimes make mistakes in judgment and behavior.
   e. Being a parent is a difficult task for which there sometimes seems to be little reward. One goal of this program is to increase the rewards and pleasures and reduce the frustrations and problems that occur.
   f. There is no such thing as a problemless family. But a family can be happy even though there are the usual problems. Skillful handling of problems is part of the answer.
2. Have the parents complete the worksheet on "My relationship with my child."
   a. Introduce the concept of the "target child": each parent is to decide to concentrate on changing and enhancing the

relationship between herself or himself and one particular child, the "target child" for the duration of the program. This will facilitate goal-setting and will enable each parent to more easily focus on application of the skills. In the beginning, it is easier to practice the skills with one child rather than more than one.

b. Stress that they must address specific behaviors. Use the following as examples:

1) Common behavior problems displayed by children:

    eating problems: refuses most foods
    bedtime problems
    helplessness
    fighting
    teasing
    temper tantrums
    insensitive to others
    bossiness
    won't do chores
    stealing
    dawdling
    poor school marks
    arguing
    physical violence
    shyness

2) Common parental responses to problems:

    taking away privileges
    talking, lecturing
    giving orders
    name calling, shaming
    criticizing
    threatening
    withdrawing
    using sarcasm
    scolding
    interrogating
    yelling at
    nagging
    spanking
    slapping

3. Discuss the responses.

a. Ask parents to share their responses.

b. Be sure to praise the identification of specific behaviors.

c. If necessary, help parents to become more specific in their statements.

d. Comment on similarities and differences among parents. Relate the lists to different expectations and developmental variations. When relevant, use examples from parents to illustrate certain developmental capabilities and limitations. Emphasize the importance of wise parenting skills and genuine acceptance of the child's feelings and viewpoint within this context.

Examples of what the leader might say:

Differences among parents. I can note differences among you as parents. Mrs. Smith believes that it is important that all the homework be done before watching T.V. and Mr. Jones prefers to let the child do it when he wants--just so it's done by the next morning. Both of these solutions may be very workable.

Developmental variation. Here is the Smith's daughter who reads very well but doesn't like her math and the Davison's daughter who is the same age, is very good at math but doesn't like to read. Each child's problem will most likely take care of itself as the girls develop further.

4. Discuss the goals parents have decided upon.
    a. Again, praise the identification of specific behaviors.
    b. Help parents to become more specific in their statements.
    c. Suggest that all changes take time; hopefully, learning the skills will help them to begin reaching some of the goals.
5. Summarize the discussion and pull together any loose ends.

E. Summary and Home Activities

1. Summarize this session's highlights. Use humor and central examples to quickly review the important highlights of the session. Mention the upcoming session, which will stress the beginning of skill training for good listening.
2. Review Home Activities assignment 1, located on page 11 in the *Parent Workbook*. Briefly go over the main purpose of the assignment and be sure that parents understand what is expected. Particularly important to get across is the need to be *specific* and to discuss actual *behaviors*, as they did in class. It is helpful for them to clarify their views of themselves as parents and their relationships with their children.
3. Assign the reading for Sessions 2 and 3: "Acceptance: The Art of Good Listening and Empathic Responding," on Page 15 of the *Parent Workbook*.

4. Ask the group if they would like to continue having refreshments. Suggest that they arrive at a mutually satisfying method of continuing refreshments. You should not be in charge of refreshments on a regular basis. Usually this brings the group closer together and continuing to provide refreshments for one another is a tool in building group cohesiveness. Moreover, having refreshments is a good way to relax and to keep the atmosphere fairly informal.

X. ADDITIONAL SUGGESTIONS

A. The first session is an especially important one. Besides the educational goals, your overriding goal for this session is to create a "group" with your new class. Therefore, you will want to be as facilitative a leader as possible. Do not be afraid to spend extra time being a "good listener" to your parents. This will be the first step in helping them to feel accepted by you. Secondly, doing so will establish your own credibility as a living example of what you are teaching. Thirdly, you will be serving as a good model of how to be accepting of another person and the parents will learn from that, just as their children model observations of their behaviors, attitudes, and values. In addition, by being a good listener, you will be able to get a good idea as to the needs and problems of your class members. This should help you "tailor" the course to be as effective as possible for them.

B. In this first session, parents are often reserved or tenuous about participating and discussing their own family concerns. The parents may be skeptical of the course as well, wondering whether or not it will be useful or just a waste of time. It is doubly important then to promote a group atmosphere of trust, confidentiality, and respect and to provide concrete examples as well as a logical rationale for the program. This means that you as the leader must be quite clear yourself about the purposes, goals, and rationale of CAPS, and that you must be especially fluent in discussing them.

C. Fathers are often less committed and more skeptical about the course than mothers. Until recently, men typically have been less involved in parenting and in parent education in our society. A new understanding of what the child, family, and individual man is missing is becoming more widespread and many men are beginning to take pride in their roles and their ability to be successful, loving, and *involved* parents. *Take extra care to involve the fathers.* Encourage couples to enroll together and to practice together at home--when both parents learn and use the skills, the rewards are increased manyfold.

In the group, encourage the men to give examples, state ideas and share feelings. Relate them to those of other men and of the women. Many men sit back and try to remain passive and uninvolved: get them actively involved.

XI. OPTIONAL ACTIVITIES

A. If CAPS is being implemented for primary prevention of substance abuse, try to order or rent the film "We Have An Addict in the House." (See XII, Resources)

1. If you can use this, cut down discussion of parent-child relationships and spend time viewing and discussing the films as a specific focus on families and substance dependency. Do review the film yourself prior to using it in the class.
2. Lead-in to film.
    a. Alert parents to the possible but erroneous message of the film: that parents alone are responsible for substance dependency in their children.
    b. Briefly summarize the point of the film: the importance of quality family relationships and open communication in preventing or decreasing the severity of problems like addiction. It is the responsibility of all family members, but parents can learn how to facilitate such quality relationships among family members.
3. Discussion of the film.
    a. While the film is running, jot down notes to yourself about the parents and children concerning how each viewed the family, the development of substance dependency, and so on. Especially noteworthy is the police officer's response to the problems of his child and family: "We talked, but didn't really listen."
    b. Discuss the characters, picking out one at a time but covering several adults and several teenagers.
        1) What were their values with regard to the family?
        2) What were they trying to escape?
        3) Why did they get involved with addicting drugs, according to *their* own viewpoints? Yours?
    c. Summarize the feelings and ideas. Reiterate the major points about family relationships and the prevention of problems. Stress the points regarding good listening, acceptance, and understanding.

XII. RESOURCES

A. D'Augelli, J. F. Parenting Skills for Alcohol Abuse Prevention: A Programmatic Approach. P. O'Gorman and J. Wicks (Eds.) Proceedings of the Region III Conference on Adolescent Alcohol/ Alcoholism Education. New York: National Council on Alcoholism, 1976; D'Augelli, J. F. Prevention of Alcohol Abuse Through The Family. Invited address at The International Institute on Prevention and Treatment of Alcoholism, Vigo, Spain, 1976. To be published in their Proceedings by The International Council on Alcohol and Addictions, Lausanne, Switzerland. Currently available from the Addictions Prevention Laboratory, The Pennsylvania State University.

B. Ilg, F. L. and Ames, L. B. Child Behavior from Birth to Ten. New York, Harper & Row, 1955.

Excellent description of typical behaviors for each year. Given that there is wide developmental variation in children, the specific age should be taken with a "grain of salt." Chapter Two, Ages and Stages, is especially helpful for the purposes of this program.

C. Public Affairs Pamphlets. 381 Park Avenue South, New York 10016. Thirty-five cents each: less in larger quantities.

Titles #410 Talking It Over At Home.
357 What Parents Should Expect From Children.
144 Understand Your Child from 6-12.
163 3 to 6: Your Child Starts To School.

D. "We Have an Addict in the House" (1972). (Film) Thirty minutes, color, 16mm, sound. Parents and teenagers, white, middle-class. Doubleday Multimedia, 1371 Reynolds Avenue, Santa Ana, California 92705.

Synopsis: Through a cross-interview technique and the portrayal of rehabilitation encounter sessions, this film explores the concerns of the drug user, his parents and his friends. It examines the lack of communication between parents and their children and the relationship between child-rearing practices and drug abuse. Various perspectives on the same situation are presented. Questions are raised about parent-child relationships and society's responsibility towards the addict.

Evaluation: The film does tend to put a great deal of emphasis on placing the responsibility of teenage drug abuse on the parents' shoulders. This issue should be given attention but the major focus to be discussed should be about the importance of parent-child relationships.

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UNIT II

COMMUNICATION IN THE FAMILY

Communication In The Family

OVERVIEW

Unit II includes three class sessions: Session 2, *Good Listening Skills*, Session 3, *Empathic Responding* and Session 4, *Giving "I-Messages": Your Own Feelings*. These three sessions form the nucleus of family communication skills. While the rest of the skills in the program may more appropriately be called parenting skills, they are based on the communication skills of this unit. The emphasis is skill training, with the major emphasis upon actual classroom practice for parents with some class discussion as needed. In other words, the parents will learn these skills by doing them in class rather than by talking about them.

Building Block Approach

While all the communication and parenting skills which are presented in the program are important, the order in which they are presented has been by careful design. Each skill is related to and built upon the previous skills. That means that each new topic includes the preceding skills as part of its basis. For example, an effective "I-Message" often includes the use of an empathic response. Likewise, the effective use of logical consequences requires that the parent be able to use empathic responding, "I-Messages" and principles of anticipatory decision-making effectively.

Good Listening and Empathic Responding are presented first because they are considered to be the most basic of all parenting skills. It is these skills, and their underlying attitudes of acceptance and interest, which are most influential in the development of the child's positive self-concept. Empathic responding communicates to the child that the parent does indeed understand and accept the child's point of view. This kind of understanding and acceptance is always appropriate, no matter what the problem is. Good Listening, which focuses on identifying feelings and point of view through verbal and nonverbal cues, is the foundation for all parenting skills. It is also very specifically the basis on which empathic responding is possible.

The third major skill, the "I-Message," is presented in immediate sequel to empathic responding. It too, focuses upon feelings and communicates those feelings in non-threatening, constructive ways. All have as their major thrust listening for feelings and accurately communicating them to another person.

A simplistic but useful way to think about empathic responding and "I-Messages" is this: empathic responding is communicating what good listening has revealed or suggested and giving "I-Messages" is helping your child to listen to you.

Listening and Empathy Skills

Interpersonal communication involves two major elements. The interchange and sharing of ideas and feelings is one element of communication; hearing thoughtfully what the other person is communicating and helping to explore it is another element, perhaps even the most important one. Communication becomes reciprocal and balanced by the mutual sharing of the roles of listener and speaker. Each person has opportunities to verbalize her or his own ideas and feelings as well as opportunities to attentively listen and absorb the other's messages. Increasingly intimate and caring self-disclosure is promoted by good listening and giving "I-messages," thereby paving the way for rich, personally meaningful relationships--between adults, between children, and between parents and children.

Many parents miss out on opportunities to encourage such relationships because they overlook the importance of listening as a crucial part of communicating with their children. *Empathic Responding is the foundation of effective communication.* Knowing how to listen and respond is probably the most difficult aspect of communication and it is made more so by the "role demands" of parenthood. Parents, and others in the dominant role in any authority/subordinate relationships, tend to implicitly or explicitly view themselves as teachers and disciplinarians who have the responsibility to make themselves heard and obeyed. While parents are indeed teachers and disciplinarians in a positive sense, they would be infinitely more effective if they practiced listening skills as well. Effective teaching and discipline are based in careful, attentive listening to the child's ideas and the feeling messages behind the ideas because the best teaching is built on the student's current knowledge and perspective--not the teacher's. Listening to and empathizing with the child's viewpoint gives the parent guidelines to what the child needs for optimal growth.

Such listening requires *good listening* and *empathic responding* skills--the ability to demonstrate genuine interest in hearing all the child has to say, to identify the feelings behind the words, to communicate that understandi to the child, and above all, *to communicate acceptance of those feelings.* The thrust of the CAPS program is to promote and facilitate increased acceptance of the child and to help the parent build positive self-esteem. *Good Listening and Empathic Responding* mean putting aside one's own reactions and opinions for the moment to enter the child's world of feelings from the child's point of view. Empathizing means really feeling those feelings for that moment and accepting them for what they are, without judgment, denial, or put-down. Empathic Responding, then, communicates acceptance, respect, and interest in the child. It also provides the vehicle for parents to help the child develop a realistic image of her- or himself and a positive sense of self-worth. The messages to the child are "I care," "I respect you" and "I love you." While the verbal messages may differ from situation to situation, the expressed emotions function as guides and "lessons" for the child's increased understanding of self and other.

Children respond very positively to these messages *when they are consistently given.* They feel respected and worthwhile as individuals and so begin to develop self-confidence in their ideas and feelings and in their ability to express themselves. They develop positive self-concepts based on their parents' communication to them that all feelings are worth exploring and are important to listen to, even though not all their behaviors are accepted as appropriate.

Further, a healthy empathic relationship between parent and child is a positive model for the child's interpersonal relationships. The listening parent is teaching the child to be genuinely concerned with other people and to be attentive to others' feelings. Also modeled is having patience with others in order to better come to an understanding of their viewpoints and to help them explore those viewpoints. Empathic skills practiced by the parent, with the genuine foundation of caring acceptance, will help the child build a broad feeling vocabulary and develop perceptivity and sensitivity to the personal meaning of experiences and ideas.

Expressing Your Feelings: "I-Messages"

Listening carefully and responding empathically to the child is the basis for healthy parent-child relationships. This is not to say that parents should always set aside their own feelings and keep them separate from the issue at hand. Communicating one's feelings and needs constructively and at the right time is another important aspect of effective communication. Indeed, Thomas Gordon[1], who coined the phrase "I-Message," makes a strong case for the rights of parents to acknowledge and express their own feelings. Many parents so immerse themselves in the role of parenting that they end up denying their own feelings and needs. Others fail to voice their feelings in ways that children can respond to positively. The long term effects of this mode of behavior are often detrimental to both parents and children. Parents who deny or ignore their own needs and feelings in the name of attending to their children first, usually begin to resent the child for taking up so much of her or his time. For their part, the children grow up without learning to respect others' needs and may become demanding people who are inconsiderate of others. When parents practice empathic listening and responding skills in conjunction with honest "I-messages," both the parent and child have opportunities to be listener and speaker and both become more sensitive to the needs of others as well as self. The emphasis is on *owning personal feelings and communicating those feelings clearly*--"I feel taken for granted when you act like I'll drive you wherever you want to go. I'd like to talk about how we can fit each other's schedules better," or "I can't concentrate on doing this paperwork when the TV is so loud." In these examples, the parent is stating her or his own feelings without personally attacking or judging the child. "I-Messages" are to be kept at the feeling level and should be descriptive of specific behavior rather than accusatory critisms.

Using "I-Messages" focuses attention on *how the behavior or situation affects the parent* rather than blaming the child--or anyone else--for the existence of the problem. The fact that the TV is loud is not necessarily a problem in itself; if the parent is working and feels distracted, that is the parent's problem and can be so stated--"I feel distracted and annoyed with the TV so loud when I am trying to work" is a different message than "Why do you always have to have that TV so loud when I'm trying to work." Of course, the voice tone and gestures are important, too. The tone needs to be calm and factual rather than angry and blaming.

In positive situations, "I-Messages" are effective in sharing personal pride, happiness, contentment with oneself or with something the child has done. It's a useful way of showing the child how much the parent cares.

[1] Gordon, Thomas. Parent Effectiveness Training. New York: Wyden, 1970.

"I felt really proud of you when I saw you marching in the band," "Thank you for the present -- I'm glad that you are my son," or "I like the nice things you do for me." *Positive "I-Messages" are a very effective way to reinforce those desired behaviors that parents wish to encourage in their children.*

In summary then, the "I-Message" is a statement about the parent's feelings. It may communicate the parent's feelings about some behavior of the child. In making frank and personal statements, rather than critical or accusatory statements, parents will help their children to learn about other people's feelings, how their behavior contributes to how others feel, and how they can attend to others' needs. Good listening, Empathic Responding and giving "I-Messages" are complementary skills in the way they function and in their impact on the family. Both grow out of the same foundation--learning how to read feeling signals, to identify feelings, and to synthesize the message behind the message for oneself or one's child.

SESSION 2

GOOD LISTENING

I. INTRODUCTION

Session two is a crucial one, for it introduces parents to skill training in full. The purpose of this session is to begin to train parents in communication skills by developing their understanding of family communication and their abilities to recognize and accurately label feelings. The session functions as a testing ground for the parents in that they begin to experience both a belongingness to the group and an initial uncertainty about the usefulness of concepts. Sensitivity and a willingness to explore both sets of feelings in the context of the skill training will do much to strengthen the class cohesiveness, sense of purpose, and task orientation.

II. GOALS

A. To sensitize parents to the concept that communication is listening as well as talking.

B. To educate parents to listen for feelings and personal meanings as well as ideas.

C. To teach parents to accurately label feelings in parent-child situation.

III. BEHAVIORAL OBJECTIVES

A. Parents will discuss the concepts of good listening and empathy.

B. Parents will identify feeling words.

C. Parents will identify feelings in parent-child situations.

D. Parents will use short feeling responses in given parent-child situations.

IV. KEY CONCEPTS

A. Good listening. Patient, thoughtful, and empathic attention to the child which permits accurate identification of the message(s) behind the words and nonverbal behaviors, including feeling signals.

B. Empathy. Experiencing the child's feelings and point of view while momentarily setting aside one's own reactions and opinions; putting oneself into the child's shoes for the moment and feeling (without judgment or rejection) those feelings and ways of thinking about the world.

C. Feeling signals. Verbal and nonverbal gestures such as choice of words, voice tone, facial expressions, and so on which "signal" the emotions being experienced.

Examples: angry voice, a slamming door, a trembling lower lip, a broad grin, a carefree walk.

D. Underlying Message. The theme or idea that is the main communication but is not necessarily spoken; also, other themes that are alluded to in words or gestures.

Examples: Spoken Message. I hate doing math. I'll never get it right.

Underlying Message. Child feels incompetent at math. Child believes she or he surely is stupid.

V. PRINCIPLES TO EMPHASIZE

A. The underlying message of good listening is *warmth and acceptance* of the child. This is the foundation for the CAPS program as a whole.

B. *Good listening is patient listening.* The parent conveys a willingness to spend time hearing what the child has to say and genuine interest in listening. If the parent cannot, for whatever reasons, listen at that moment, she or he will arrange for another time mutually satisfactory to both. A brief good listening response, however, is in order even when rushed: "Wow--you really have something great to tell me. I am feeling hassled now, though. Can we talk after I finish cooking dinner?"

C. When the parent senses that the child wants or needs to talk, it is helpful to "*open the door*" by a gesture (e.g. patting the chair, signaling to come in) or a phrase (e.g. "You're looking sad--want to talk a bit?"). The parent *indicates a readiness to listen* and shows the child that she or he wants to listen.

D. Steps for Good Listening

1. The first step in good listening skills is *attending to feeling signals:* when listening, think about the child's words and nonverbal messages, not about your next response or the "right thing to do." *Good listening is attentive listening.*
2. The second step is to "*read*" *the feeling signals* the child is sending, that is, to identify the emotions which the child is experiencing or relating.
3. Thirdly, *identify the message being communicated* by the feeling signals and words. By putting together what is seen, heard, and felt, the parent should be able to recognize the theme of the message and should summarize this theme in her or his own mind. In so doing, the parent puts aside personal feelings and reactions, judgments, or opinions and tries to feel what the child is feeling as if they were her or his own feelings. Recognize that this is,

however, a *tentative* interpretation of what the child is experiencing: the key to the good listening response is that it is tentative and needs to be checked out with the child, opening up the realm of feelings to exploration. Good listening, though it is empathic, is not mind reading.

4. Fourthly, communicate your tentative understanding of the underlying theme and feelings by verbally expressing the *summary of the message*. The empathic response should identify the feelings and the reason(s) for those feelings: "You're disappointed because your club couldn't go on the trip today." The degree of tentativeness varies with the strength of the feeling signals and verbal statements: *the less readily observable, the more tentative.* This can be shown through voice tone or choice of phrasing. The good listener implicitly or explicitly says, "You seem to feel..." or "Were you saying that...?"

E. The good listener is a *hypothesis tester* keeping this in mind: "I'm trying my best to understand your feelings and viewpoint, but it is a mutual process." Both parent and child will learn over time to look into the many-faceted emotions and reactions of people and situations in an atmosphere of respect and acceptance and warmth.

VI. MATERIALS NEEDED

A. Pencils and paper; or parents can write in their workbook.

B. Blackboard for classroom teaching and impromptu class work.

VII. LEADER PREPARATION

A. Read the Overview for Unit II, *Communication in the Family,* and the parent reading entitled "Good Listening." Prepare your talk on the rationale for good listening, clearly covering the major points.

B. Review the Key Concepts and Principles to Emphasize. Be able to fluently put them into your own words.

C. Look over the session procedure, familiarizing yourself with the Self-Concept diagram (page 79), the Skill Practice Statements (page 80), the Home Activities and the examples given. Plan a time schedule for the session.

D. Review the homework--complete it yourself to get a good sense of the thinking and work that goes into it. Think about the important points and how to capitalize on the group's examples.

E. Plan and practice the role plays, either with a co-leader or one of the parents.

VIII. GENERAL FORMAT

A. Review Home Activities 1.

B. Introduction to Good Listening.

1. Point out the relationship of homework examples to good listening.
2. Give the definition and rationale.

C. Developing Good Listening Skills.

1. Modeling by the leader.
2. Feeling Words Activity.
3. Class Practice in Identifying Feelings.

D. Summary and Home Activities.

IX. SESSION PROCEDURE

A. Review Home Activities 1

Ask parents to share some of the problems with their children. Point out similarities among families.

1. Focus briefly on the parent behavior. 2. Ask each parent to state on behavior she or he would like to change. Point out that these behaviors are the ones the parents learn from their own parents. Be accepting of their frustrations and reinforce their desire to find alternative behaviors that will be more positive. Help them restate these alternatives as goals.

B. Introduction to Good Listening

1. Base the transition to good listening on the responses from homework.
    a. Parents have verbalized strengths and weaknesses in their relationships with their children and have talked about aspects they would like to change. Relate those changes to the use of good listening skills.
    b. Pick two or three examples as given by the parents and briefly discuss how good listening should promote the desired changes.
2. Give the rationale for good listening.
    a. Using the ideas and points in the Overview in the parents' reading entitled, "*Good Listening*," and the resource books you have reviewed, begin to teach the group about good listening.
    b. You may want to use the Self-Concept Diagram depicting differential effects of good listening vs. critical fault finding on children, (page 79). As you do so, give examples of different kinds of ineffectual or counterproductive responses. For example, when you point out that ridicule and sarcasm lead to certain behaviors and feelings, you might say: "For example, ridiculing the child gives the child the message that she or he is a failure and not to be respected. The low self-esteem and sense of worthlessness usually lead to behaviors like aggressiveness or withdrawal. Examples of

ridiculing responses are, "You're stupid for saying that" or "Don't be such a fool! I guess you'll never learn."

c. Relate good listening to drug dependency prevention. Point out that in situations where the child brings up the topic of drug use (including alcohol and legal drugs) or has become involved in some way, good listening skills are essential because they help the child as well as the parent to better understand her or his own motivations and needs. The effectiveness of the parent's responses will depend upon their full understanding of the situation--their empathic understanding of the child's feelings and viewpoint. Often children are communicating nothing more than natural curiosity and a desire to understand more about their world. Good listening enables the parent to respond to those needs rather than to their own fears and worries.

d. Interweave definitions of good listening and empathy into the discussions.

e. Discuss and explore the important concepts and the association between good listening, the development of positive relationships and healthy self-concepts.

1) Be open to their worries about good listening:
   a) Disrespect from children.
   b) No chance to have my say.
   c) Accepting feelings even if I disagree with them.
2) Help parents interact during the discussion, reduce anxieties and provide support for one another as they learn to use good listening.
3) Act as an unobtrusive good model here. Practice good listening skills during the discussion.

C. Developing Good Listening Skills

1. Modeling by the Leader and Volunteer or Co-Leader

a. Stop the discussion at an appropriate point to introduce the skills themselves. Tell the group that much of it will become clearer as they see what is meant. Then, the two leaders or the leader and a parent role play one effective good listening and one poor listening interaction.

1) Enact the good listening role play first, telling the group that this is an example of good listening. Have one person discuss a personal problem while the leader demonstrates how to be a good listener. Try to practice beforehand.
    a) Ask the group to comment on what they noticed about the interaction. Help them to recognize the principles of good listening without telling them didactically. Build on their understanding, even if it's off a bit, by raising the good points and elaborating on them.
2) Enact the poor listening role play, using the same personal problem. Be sure to use nonverbal as well as verbal signs of poor listening: little eye contact, fidgeting, etc., advice-giving, moralizing ("You should do...." "You never should ..."), reassuring ("Well, you'll feel better tomorrow") and so on.
    a) Ask the group what they noticed about this interaction and help them formulate "principles" of poor listening.
    b) Discuss the contrasts between the two role plays.
3) Enact one more good example. Give the principles of good listening in summary form, using examples from the role plays.

2. Feeling Words Activity

Parents often have a limited range of feeling words to use in identifying their feelings. They are limited to words like happy, sad, angry and upset. There are numerous additional words that are refinements of these four words. Ask the parents to think of additional feeling words and write them on the blackboard. Write general feeling words at the top. List as many as the parents can think of.

Example:

happy	sad	angry	upset
glad	left out	furious	frustrated
overwhelmed	down	mad	disgusted
excited	disappointed	irritated	uncomfortable

3. Class Practice in Basic Good Listening
   a. Identifying Feelings (Written)
      1) The task is to identify the main feeling or feelings in each practice statement which the leader reads, (page 80). Each person will write down her or his response. After reading a statement, go around the circle to share and check on each feeling the parents have written. Hand out paper and pencil as needed. Discuss the varied feelings that people may have identified. Read about three or four Practice Statements.
   b. Identifying Feelings (Verbally)
      1) The leader should recall situations as told by the parents and ask them to identify the feelings of the child and the parent in those situations.

         Example: "Remember the Smith's son, Jimmy, who wished he were a better ball player. What do you think are his feelings? How did you feel as a parent?

         Or: Think of Susan, your daughter, Mrs. Brown. How did she feel when she lost her lunch money last week? What were your feelings about the issue?
      2) Have each parent briefly describe one interaction with her or his child and identify the feelings in one or two words.
   c. Identifying Feelings Verbally in Role Plays
      1) If there is time, have two parents volunteer to enact a parent-child situation which one of them has experienced in their own family. Have the one playing the parent identify the feelings of the "child" by simple good listening statements: "You feel ________________."
      2) Ask for two more volunteers, etc., or break into dyads with one enacting the "parent" and the other the "child." It is best to use their personal examples. Use the Practice Statements on page 80, if necessary.

D. Summary and Home Activities

1. Summarize the session's highlights and briefly state what the class will do in Session 3.

2. Assign Home Activities #2 and review the instructions.
3. Ask parents to review the reading "*Acceptance: The Art of Good Listening and Empathic Responding.*"

X. ADDITIONAL SUGGESTIONS

The leader will need to keep the class to the task of identifying feelings. The group can easily get into storytelling about their children rather than working on the listening skills. Keep the group on the track and move along so that you can accomplish all of the session activities.

IX. RESOURCES

A. Ginott, H. G. Between parent and child. New York Macmillan Co., 1965.

B. Hamachek, Don E. "How to listen to your child, How to get your child to listen to you." National Education Association, 1973.

An excellent 14 page booklet written for parents. It focuses on the importance and know how of healthy parent-child relationships (30 for $2.00).

Order from: National Education Association
NEA Building (Order Dept.)
Saw Mill Road
West Haven, Conn. 95516
Phone (203) 934-2669

SELF-CONCEPT DIAGRAM

Development of the Child's Self-Concept

Cues from "Significant Others"

- ridicule
- sarcasm
- annoyance
- rejection
- anger
- distrust
- discouragement
- impatience

Child Behaviors

- aggression
- indifference
- failure
- withdrawal
- tension
- hostility
- fear
- guilt
- submissiveness

SENSE OF FAILURE

Negative Self-Concept

Cues from "Significant Others"

- acceptance
- concern
- encouragement
- security
- empathy
- sensitivity
- understanding

Child Behaviors

- success
- creativity
- achievement
- belonging
- interest
- identification
- cooperation
- curiosity

SENSE OF PERSONAL WORTH

Positive Self-Concept

GOOD LISTENING AND EMPATHIC RESPONDING

Skill Practice Statements

1. "I wish I didn't have to go to the dentist."

2. "Why do I always have to wear hand-me-downs? I never get anything new."

3. "Dad, my friend Joy gets a dollar a week for an allowance. How come I only get 35¢?"

4. "The kids won't let me play ball. They say I'm too little."

5. "Look, Mom, I got all my math right today!"

6. "Mom, can I go fishing with my friends? Please, I won't fall in the water, I promise."

7. "Boy, I don't know what to do. Tonight is the game and I can't find my ball glove."

8. "You always let Jim have his way. Why can't I have mine?"

9. "Grandpa said he'd take me fishing on Saturday. Boy, I can hardly wait!"

10. "Is spinach really good? None of the kids I know like it."

11. "There's nothing good on TV. And there's nobody to play with around here either."

12. "Your're a real pain. You never let me do anything. I'm not a baby, you know."

13. (11 year old bursts into the house after school) "Mom, I was elected to be president."

14. "I just can't stand Sally. She always wants to have her way and wants to be first for everything."

15. "School was really neat today. We got to play ball for a whole hour!"

SESSION 3
EMPATHIC RESPONDING

I. INTRODUCTION

This session focuses upon skill training in giving quality empathic responses. Session two, which emphasized good listening skills was a necessary prerequisite to learning the empathic response. The major thrust of this session is on actual practice. Provide as much opportunity for classroom practice as possible through dyads, practice statements and role plays. For it is through actual practice that the empathic responding skill begins to become part of the parent's repertoire of behaviors.

The leader will continue to promote the attitude of warm acceptance through modeling and class discussion.

II. GOALS

A. To teach parents how to summarize the main theme or underlying message in a child's communication.

B. To teach parents how to communicate their understanding and acceptance of the child's feelings.

III. BEHAVIORAL OBJECTIVES

A. Parents will use short feeling responses in given parent-child situations.

B. Parents will use complete empathic responses in parent-child situations.

IV. KEY CONCEPTS

A. Short feeling response. A brief verbal response to a statement or feeling signal which identifies the feeling(s) behind the message. Example: "You're feeling proud" or "Feeling blue today, huh?" There are times when the short feeling response is sufficient to the situation, such as when the feelings are being expressed quickly in succession or when the mood is laconic.

B. Complete empathic response. A full verbal response to a statement or feeling signal which identifies the feeling(s) behind the message and relates the feelings to the main theme that the child is talking about.
Example: "You're feeling proud because you finished putting together your train set!" or "Sounds like you feel blue today because your friends are all out of town."

V. PRINCIPLES TO EMPHASIZE

A. To give short feeling responses:

1. *"Read" the feeling signals* to identify, at least tentatively, what the child is experiencing.
2. *Identify* the feelings.
3. Formulate a *three or four word* empathic response that shows that you understand and accept the feelings.

   Example: "You feel upset."

B. To give complete empathic responses:

1. Identify and *label* the feeling message.
2. Identify the *reasons* for their feelings insofar as you can tell at that moment.
3. *Summarize* the complete theme in your own mind, as you *tentatively* understand it.
4. *Verbally respond* with your empathic response, showing that you understand and accept the feelings by your nonverbal signals as well.

   Example: "Sounds like you're upset because somebody took your game."

VI. MATERIALS NEEDED

A. Posters with feeling words and synonyms.

B. Paper and pencils.

VII. LEADER PREPARATION

A. Review the overview to Unit II, the parent reading on "*Acceptance: The Art of Good Listening and Empathic Responding*," the Key Concepts and Principles to Emphasize from Session 2, and the Key Concepts and Principles in Session 3. Be sure that you are at ease in presenting and summarizing the ideas in your own words.

B. Read through Session 3 to familiarize yourself with the procedural format, the method for organizing activities, and the materials needed to carry out the activities. Plan out a time schedule for the session, including in this session any of the skill building activities that were not possible to include in the last session due to time constraints.

C. Review homework 2, "*Good Listening*," which you have just corrected, and summarize the basic points and good examples.

D. Look over homework 3, "*Empathic Responding*," which you will assign at this session.

E. Prepare several large feeling word posters, as in the example on page 90. (Optional)

VIII. GENERAL FORMAT

A. Review Home Activities 2 (return Home Activities 1 to parents).

B. Further practice in giving short feeling responses.

1. Give the introduction and modeling.
2. Practice activity.

C. Practice in giving Empathic Responses

   1. Review the principles
   2. Modeling
   3. Practice

D. Summary and Home Activities

IX. SESSION PROCEDURE

A. Review Home Activities

1. Ask people to share the feeling words they wrote as synonyms.
2. Ask for volunteers to read their feeling identifications and short feeling responses. Have two or three people read each item to point up similarities and differences. Briefly discuss and reflect on reasons. Constructively evaluate the feeling identifications and responses: some will be very accurate and perceptive. Others will be off target or too stiff. Suggesting the use of a different feeling synonym might help. The leader should be as reinforcing and as encouraging as possible.

B. Further practice in giving short feeling responses

1. Lead into this activity on the basis of the homework, e.g., "You have really begun to pick up on identifying feelings and can use them in brief responses. Let's practice that some more in verbal role plays." Role model with a volunteer parent in the class or with the co-leader.
    a. Have each leader talk about how they were feeling that day; have the other be the listener, then switch roles. Use short feeling responses - "You were really excited," "Seems like you were bushed," and so on.
2. Have group split into dyads and take listener and responder roles, talking about their day (activities and feelings).
3. Suggest that dyads enact parent-child role plays. Having them use their own experiences, use the situations from the Home Activities. If necessary, help out a stumped dyad by using a situation from the Skill Practice Statements. (Page 80)
4. Discuss their feelings about the responses and their progress. Lead questions:
    a. How comfortable were you in responding with short feeling responses?
    b. Do you feel fluent in using such responses?
    c. Do you find them somewhat incomplete?

C. **Practice in giving Empathic Responses**

1. Use the class discussion as a lead into this topic. Stress making the feeling responses more complete and meaningful, although it is true that short feeling identifications are sometimes most appropriate. Review principles of complete responses (see Principles to Emphasize).
2. Modeling
    - a. Model one effective complete response.
    - b. Model one ineffective complete response.
    - c. Model one effective complete response.
    - d. Discuss parents' observations: Highlight the application of the principles. Point out how voice tone, attentiveness, and so on are related to giving effective responses. It is suggested that the leader model the effective and ineffective responses in short parent-child role plays. A parent could be asked to "play" his or her child and the leader will be the model.

      Alternative suggestion - the leader can model the responses with one of the parents being the adult speaker. The parent might talk about her or his job, concern about her or his child or the difficulty of being a parent.
3. Practice
    - a. Read three or four skill practice statements and have parents write out complete empathic responses. Read them out loud and compare. Reinforce effective application of principles.
    - b. Break up into triads. Have one person be the listener, one the responder, and one the observer. Each should take a turn at all three roles. Ask the parents to think for a few moments about one situation they wish to enact, so that they can explain it to the others when the time comes. Each parent should play her or his child in the situation they select.
        - 1) Enact parent-child role plays:
            - a) Have the observer comment on the quality of the responses providing constructive feedback to the others in the triad.

b) Have the parent as "child" comment on her or his feelings as child in the situation.

c) As leader, you may wish to be a floating observer, going around to each triad to give helpful feedback.

d) As a group, discuss the role plays. What feelings were experienced, how well they felt they could use the response.

e) Encourage them to use empathic responding at home, with spouses as well as with children.

D. Summary and Home Activities

1. Summary: Review the important points of empathic responding and continue to reinforce their efforts. Briefly describe the next topic, "*Giving I-Messages: Your Own Feelings.*"
2. Assign Home Activities #3. Briefly go over the instructions to be sure that everyone understands the assignment.

X. ADDITIONAL SUGGESTIONS

A. Training parents to be effective empathic responders is a difficult task. Your time is limited to approximately two hours so use it wisely. Do not allow the class to waste time in rambling class discussion. Keep all activities focused on the empathic responding principles and you will insure greater success.

In future sessions continue to review and emphasize the good listening and empathic responding principles. This is part of the "building-block" approach.

B. Feeling Word Posters

Purpose: To build and expand the feeling word vocabulary.

a. Tape several large poster papers to the wall and write a general feeling word at the top. With dry markers, parents can add as many synonyms and related feeling words as they can think of. See example below.

b. This is an enjoyable activity to begin sessions two and/or three. Other heading words could be: fear, sad, happy, love, excited, dumb, and so on.

anger

unhappy
furious
rage
sad
annoyed
offended
ticked-off
disregarded

XII. RESOURCES

A. Dreikurs, R., and Grey, L. A parents' guide to child discipline. New York: Hawthorn Books, Inc., 1970.

B. Ginott, H. G. Between parent and child. New York: Macmillan Co., 1965.

C. Gordon, Thomas. Parent effectiveness training. New York: Wyden, Inc., 1970.

D. Guerney, Louise F. Foster parent training program. University Park, Pa.: Center for the Development of Human Services, The Pennsylvania State University, 1975.

SESSION 4

GIVING "I-MESSAGES": YOUR OWN FEELINGS

I. INTRODUCTION

In session four, parents begin to apply their new skills in accurate feeling identification to owning and identifying their own feelings. As stated earlier, communication is a two way process--listening and speaking. In both, a genuine interest in understanding what is being felt and experienced and the ability to identify those feelings are important elements of healthy relationships. Knowing how to communicate that interest and understanding to the other person is a third important element. Communicating to the child an understanding of what she or he is feeling and thinking is done through good listening and empathic responding. Communicating what the parent is feeling and thinking is done through giving "I-Messages." The term "I-Message" was originated by the parent education authority, Thomas Gordon. "I-Messages" are a means of candidly sharing one's own viewpoint without imposing it on the child. One of the pitfalls, though, is that the parent may view the "I-Message" as license to critize and vent anger toward the child. You may wish to discuss this issue with your group and caution them about the misuses of the "I-Message."

The real essence of the "I-Message" is this: "These are my ideas and my feelings and stem from my needs," rather than "These are my ideas and my feelings about your problems or what you are doing wrong." It is important that the parent recognize and acknowledge her or his feelings when a problem arises between the child and parent. The "I-Message" is a constructive communication skill that helps both parents and children understand and resolve some of the everyday conflicts that inevitably arise among family members.

II. GOALS

A. To help parents become more aware of their own feelings and needs in living with their children.

B. To teach parents the meaning and usefulness of "I-Messages."

C. To teach parents to use "I-Messages" appropriately.

III. BEHAVIORAL OBJECTIVES

A. The parent will be able to define and explain the uses of "I-Messages" verbally and/or in written form.

B. Given a stimulus statement, the parent will be able to respond with an appropriate "I-Message" four out of five times.

IV. KEY CONCEPTS

A. "I-Message." A statement of feelings and viewpoint which clearly identifies the feelings in the statement-giver; often, it is a message of the parent's feelings about something the child is doing that is a problem or a pleasure for the parent. An "I-Message" generally tells the child how her or his behavior is affecting the parent.

Examples - "I've had a hard day at work and I need some quiet time to read the paper. I will play with you after dinner."
- "I was embarrassed when you said that Aunt Jane's brownies were too hard."
- "I'm proud of you."
- "I get so frustrated to hear the two of you arguing every day about what to watch on TV."

B. Problem-oriented "I-Message." A statement of feelings that lets the child know how her or his behavior is affecting you in ways that you would like to have changed.

Examples - "I feel like a slave around here when I have to pick up after all of you."
- "I have trouble talking to my friend when you interrupt me."
- "I really get upset when you leave your clothes on the floor."

C. Positive "I-Messages." A statement of feelings that lets the child know how her or his behavior is affecting you in ways that you enjoy and approve of; a way of praising and reinforcing the child for behaviors you would like to see continue. Also, a message about your own personal positive feelings about anything that is affecting you that you would like to share with your child.

Examples - "I'm proud of you--you are really working hard on your spelling."
- "I am really happy today because I finished all my work and think I did well."
- "I feel so good when I see you and your sister deciding together about how to play the game. What an improvement you two have made in getting along better!"

V. PRINCIPLES TO EMPHASIZE

A. *Parents are people with feelings and needs, too,* and they are entitled to their own need satisfaction within the context of the family.

B. Giving "I-Messages" *consistently* is a way to constructively teach children to become sensitive and responsive to the needs of others.

C. In order to use "I-Messages" fluently and appropriately, the parent must be able to *identify and label her or his own feelings,* just as in giving empathic responses, the parent must be able to identify and label the child's feelings.

D. When the parent knows and acknowledges her or his own feelings, the child is given reason for listening and for acting in particular ways. Moreover, the child cannot be expected to guess your feelings or assumed to know them. *Second-guessing or mind-reading is neither constructive nor useful in family relationships.* If the child begins to learn how and why her or his behavior affects the parent in different situations, the child is more likely to act in the desired ways.

E. Mutual respect and trust between parents and children is developed on the basis of *shared, honest feelings* that are expressed constructively and appropriately.

F. The "I-Message" is *not a license to criticize* the child in the guise of an affective statement. "I-Messages" imply ownership of the feelings and they are not to be used to blame or criticize.

G. The parent's "I-Message" feeling words should *match* her or his real feelings about the issue at hand; understating or overstating the feelings being experienced is not helpful.

VI. MATERIALS NEEDED

A. Blackboard for notes and points of emphasis.

B. Pencils and paper.

C. 3 x 5 cards with parent-child situations on them.

VII. LEADER PREPARATION

A. Read the parent reading entitled "*Giving 'I-Messages': Your Own Feelings*," and reread parts of the Unit II overview which are relevant to Session 4. Review the principles of "I-Messages," until you can give a number of examples to illustrate each one without having to pause and construct them. Prepare your talk on the rationale for giving "I-Messages."

B. Familiarize yourself with the session procedure, and work out sections you feel need to be further specified.

C. Review the Home Activities 3, "*Empathic Responding*." Do the assignment yourself if you have not already done so. Consider the important points so that you can review them in class.

D. Plan and practice the role plays.

E. Complete Home Activities 4, "*I-Messages*," to thoroughly familiarize yourself with it.

VIII. GENERAL FORMAT

A. Review Home Activities

B. Introduction to "I-Messages"

1. Relevance of giving "I-Messages"
2. Rationale

C. "I-Message" Skill Training

1. Modeling by the leader
2. Written "I-Messages"
3. Small group practice
4. Role Play Practice

D. Home Activities and Summary of Highlights

IX. SESSION PROCEDURE

A. Review Home Activities 3, "*Empathic Responding.*"

Use this time to repeat the key ideas and principles of good listening and empathic responding. Parents often have questions after they have done the home activities and given the skills some thought and try-outs. This is the time to clarify any misconceptions and review the principles of Session 3.

B. Introduction to "I-Messages."

1. Relevance of giving "I-Messages": Show how good listening and giving "I-Messages" are complementary by making use of Home Activities examples.
2. Rationale: Give the rationale, a brief lecture on the meaning, uses, and advantages of giving "I-Messages." Contrast this skill with responses which blame, accuse, criticize, and so on.
    a. The more concrete you can make your explanations, the better. Use the parents' personal experiences and examples to illustrate your principles. For example, point out specific needs and rights that parents have--the need to read the paper without being bothered, the need to have private conversations, the right to have phone conversations without interruptions, and the need to have help from the children in household responsibilities, and so on. Use personally relevant examples which parents may have brought up to help them to more easily understand your point. (Recall their responses in the first session and home activities in particular.)
    b. Go around the group and ask each parent to state one of their personal needs which they feel they have a right to satisfy within the family. Model an "I-Message" to some of the responses as a way of demonstrating the use of "I-Messages."

Examples - The right to watch the news on TV without interruption.
- The need to have the children help with the dishes.
- The right to expect that everyone in the family takes part in daily chores.
- The right to privacy in the bathroom.

C. "I-Message" Skill Training

1. Modeling by Leader

   a. Briefly describe a situation and then give an "I-Message" in response. Repeat with 3 or 4 different situations. Use the "I-Message" Practice Statements (page 107) or think of situations based on your own experiences and those of the parents in your group.

   Effective Example:

   Child is playing quietly with puzzles in the family den while the parent is reading: "I like it when we can each do what we like to do and still be together at the same time."

   Ineffective Example:

   "I'm glad I can read the paper while you leave me alone for a change."

   Effective Example:

   Mother and Father need to have a conversation about a social invitation extended to them by a friend. They need to make a decision immediately as the friend is waiting on the telephone. The child keeps interrupting. Father says, "Mother and I need to talk something over right now and we can't do that when we have interruptions. We will talk to you as soon as we hang up the phone."

   Ineffective Example:

   "Be quiet and go play. Can't you see that you shouldn't interrupt me now?"

   b. Identify parent problems and feelings. Go back to the situation you modeled. Ask parents to respond to the following questions.

      1) What is the problem?
      2) Whose problem is it? Parent, child or both?
      3) What feelings does the parent have?

2. Written "I-Messages"

   a. Using the "I-Message" Practice Statements on page 107, read several statements to the parents, and ask them to write down an "I-Message" for each statement. Go over each one, asking parents to read their responses. Reinforce the parents whenever possible and make helpful suggestions as necessary.

b. "I-Messages" Vs. Ineffective Messages (Optional)

Ask each parent to write an ineffective response to each statement to contrast the qualitative difference between those that evaluate and criticize the child and the "I-Message." They should write an ineffective response at the same time as they write the "I-Message."

Example:

"I-Message": "I need to be alone for a little while. I'm dead tired and feel very cranky."

Ineffective Message: "For once in my life will you leave me alone--now get out of here!"

3. Small Group Practice

Divide parents into groups of 4 or 5 people. Have each parent describe a personal situation with their own child that could warrant an "I-Message", either a positive or a problem-oriented one. Each parent in the group will give an "I-Message" response to that situation. Each member of the small group should have a turn at presenting a personal example to which the rest of the members will respond.

4. Role Play Practice

a. Have people break into dyads. Using a parent-child situation from personal experience or from the practice situations, the parents should take turns at being the parents and giving "I-Messages" in the situation. The role plays should be lengthy, really carrying out a typical situation. Remind parents to also use empathic responding when it is appropriate. In most situations using only one parenting skill is incomplete or at best limited response. Point out that parenting skills are frequently to be used in combination but that they necessarily must be taught one at a time to avoid confusion. This is part of the building-block approach which is discussed in the course introduction.

b. Discuss their dyad experiences.

1) Were there any difficulties?
2) Did you feel limited?
3) How did you think your child would have felt if he or she had been talking to you?

D. Home Activities and Summary of Highlights

1. Review the principles and summarize the issues the class has focused on. Put closure on the session's discussion and provide feedback to parents regarding their progress.
2. Assign the reading for Unit III, "*Problem-Solving Through Anticipatory Decision-Making*." Briefly give directions for the Home Activities and clarify any questions.

X. ADDITIONAL SUGGESTIONS

A. As you skill train, you will be continually clarifying and adding to your original explanation of "I-Messages," as the specific situation demands. You will also be modeling effective "I-Messages" as a natural aspect of your interaction with the class.

B. It is very important to stress matching the "I-Messages" statement to real feelings: if the parent is happy, she or he should use enthusiastic, happy feeling words. If the parent is very annoyed and frustrated, she or he should use *accurate* feeling words to communicate that to the child.

Example: The 7 year old is again teasing the 4 year old. It causes a great deal of friction and disharmony for everybody and really makes the parent mad. If the parent says, "I don't like it when you tease," it would be an understatement. It would be more accurate for the parent to let the child know the intensity of that frustration. "I get so frustrated and angry when you keep taking Susan's toys away. I wish we didn't have all this teasing and crying. Sometimes I can hardly stand it."

C. When parents first learn to give "I-Messages," they are more frequently negative than positive. Help them to use "I-Messages" in positive as well as problem situations. Emphasize, in addition, the distinct advantages of "I-Messages" over other kinds of responses in problem situations.

D. The word "angry" in an "I-Message" must be carefully used. Often parents tend to overuse it until they are able to expand their vocabulary of "anger words." Anger is a broad term; there are usually underlying feelings that cause the anger, and those feelings must be identified in order for the message to be meaningful to both child and parent. Feelings such as annoyed, frustrated, offended, disregarded, left-out, used, and so on, are often the real feelings behind the anger. Help parents to use very specific "anger words" in their "I-Messages."

E. Positive praise goes a long way. Give parents opportunities to express their positive "I-Messages" as well:

Examples - "I like it when we sit here and each read our own book."
- "I was glad to see your bike on the sidewalk today so I didn't have to get out of the car and move it myself."
- "You did a good job of cleaning the garage--I'm proud of you."

F. Parents may not see success at home immediately and will bring this up in class. There are often several reasons why immediate success is not achieved.

First, the parents' skill level may still be clumsy and something less than natural. This is to be expected and only with practice will they become more competent with "I-Messages."

Secondly, the "I-Message" may sound very strange to the child. The child may not take the parent seriously and even disregard the message. "I-Messages" need to be developed into the repertoire of the parent-child interaction.

G. Another problem to be on the lookout for is parents who will seize the "I-Message" as license to vent all kinds of pent-up frustration and anger on the child. Review the ownership of the problem issue to help those parents use the "I-Message" under the right conditions.

H. Parents will ask, what if the "I-Message" and empathic responding doesn't work? There are times when these two skills are not enough. There indeed may be a legitimate conflict of needs or opinions--especially with older children. Additional skills (Sessions 5 and 6) should give the parents additional help with those problems.

In the meantime, point out that the "I-Message" is one useful tool in parenting but is not intended to solve all problems. With practice, they will learn to use it with more discrimination and success.

XI. OPTIONAL ACTIVITIES

A. Write a child statement or description of a situation on 3 x 5 recipe cards. Give one to each parent for "I-Message" practice. These can be used in several ways as suggested or make up your own uses.

1. Have parent write an "I-Message."
2. Have parent give verbal "I-Messages" and then discuss them in class.
3. Have parent read the card and have another parent give the "I-Message" response.

XII. RESOURCES

A. Abidin, R. Parenting skills: A trainers manual. New York: Behavioral Publications, Inc., 1975.

B. Gordon, Thomas. Parent effectiveness training. New York: Wyden, Inc., 1970.

C. Guerney, Louise F. Foster parent training program. University Park, Pa. Center for the Development of Human Services, the Pennsylvania State University, 1975.

"I-MESSAGES"

"I-Message" Practice Statements

1. Your child wants to go shopping to spend her or his allowance. You don't have the time today and have promised to take the child tomorrow. The child keeps asking you to take her or him today. "Please mom, can't we go today? It won't take long."

2. You have just finished picking up all the clutter in the living room. Your children (10 and 12) come in and proceed to kick off their shoes and make themselves comfortable. They carelessly drop the newspapers as they read them and leave candy wrappers on the coffeetable.

3. You and your spouse need to have a private conversation about some financial matter. Your child keeps interrupting you with questions.

4. Your child has come in with muddy shoes and tracks all the way up to the bedroom.

5. Your child comes home and tells you that he or she won the physical fitness race in running. "Mom, I won the race today--I came in first place!"

6. You and your child have agreed that 8:30 is the bedtime. Every night your child procrastinates and finds ways to prolong the bedtime ritual of teeth brushing, etc.

7. Your child wants to go to the movies but has not cleaned her or his room--a job that she or he agreed to do.

8. Your son likes to climb trees and is trying to climb a rather small tree that is your favorite dogwood.

9. It's your birthday and your daughter has purchased you a gift with her own money. In the past she has been very stingy about spending her own money on others, so this gift is a pleasant surprise to you.

10. Your son and his friend are playing ball and the ball rolls into the flower garden rather frequently. In their efforts to retrieve the ball they come close to trampling the flowers.

11. You walk into the bedroom and find two of your children jumping up and down on the bed.

12. One household task your child has agreed to do is to help with the dishes each evening. Each evening, however, he must be reminded several times about the task. You are getting tired of this.

13. You walk into the kitchen and find your child snitching cookies after you have just told her "No more snacks before dinner."

14. Everyone is excited about going to the beach today for a picnic but no one is helping to get ready. You, the parent, seem to be left to do everything.

15. Your child likes to play with his collection of matchbox cars but doesn't like to pick them up again. He regularly leaves them laying on the floor when he is finished.

UNIT III

PROBLEM SOLVING IN THE FAMILY

Problem-Solving In The Family
OVERVIEW

Sessions five and six are taught as a single unit on problem-solving in the family, with the introduction and demonstration of different problem-solving skills to suit various needs and goals. The main emphasis is on helping parents to deal concretely with those family problems that cause friction and conflict in every home. Such day to day problems as organizing household chores, keeping track of belongings and deciding on new privileges, will be covered. The discussion and skill practice should be kept as concrete and problem-specific as possible, without wandering into complex, rather global problems like why 10 year old Frank cannot do math. However, making decisions about how to best help Frank with his long division math difficulties can be addressed. Similarly, parents should be helped to see how they can apply *anticipatory decision-making skills* to educate their children about drugs and their uses.

For purposes of clarity, the explanation and rationale for sessions five and six are provided in the introduction to each respective session.

Building Block Approach

The skills (good listening, empathic responding, and giving "I-Messages") already taught should be integrated into your teaching of the problem-solving skills, in line with the CAPS' building block approach. In real life, several skills are used in any particular parent-child interaction. Therefore, it is most important to give the parent as much opportunity as possible to practice Anticipatory Decision-Making and, in Session 6, the other problem-solving skills in conjunction with good listening, empathic responding, and giving "I-Messages." What the parent says and how it is said makes a great difference in parent-child situations. The basic communication skills are an integral part of successful problem-solving approaches. The leader should insist that parents continue to use the communication skills as they learn new problem-solving skills of sessions 5 and 6.

SESSION 5
ANTICIPATORY DECISION-MAKING

I. INTRODUCTION

Session five focuses upon how parents can deliberately make a plan of action that will either head off a problem or alleviate an already existing one. The basis for session five lies in the work of Louise Guerney[1] through her development of the concept of "structuring." Your task, as the leader, will be to teach parents how to utilize the concept of structuring through a problem analysis and decision-making process. The *Anticipatory Decision-Making* (A-D-M) *Flow Chart* will be useful in helping parents to understand a given problem and what needs to be done to solve the problem. You will want to guide parents through the chart in a step by step fashion. The goal is to get parents to be able to analyze their own problems, to understand the complexities of a problem and to reach a wise decision about how to best handle the problem.

Parents should be encouraged to include their children in the A-D-M process as much as possible. While some children may be too young, most children can be included in some or all of this process. The more the child is genuinely included in this process, the more likely that success will occur.

The rationale and advantages for A-D-M are presented in the parent reading, "*Problem-Solving Through Anticipatory Decision-Making*" (page 47 in the Parent Workbook). Hence, it is not repeated in this introduction. Rather, this section will focus upon the actual step by step A-D-M process. Be sure to refer often to the Flow-Chart on page 129 (p. 53 in Parent Workbook).

The Antipatory Decision-Making Process

Step 1: Self-Structuring

As a general rule of thumb, anticipatory decision-making always begins with *self-structuring*. That is, the parent needs to think through and understand the anticipated problem--or desirable goals--so that she or he can plan and structure the decision-making process. The child should be included when at all possible.

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[1] Guerney, L. F. Foster Parent Training Program. University Park, PA: Center for Human Services Development, 1976.

Self-structuring is a thinking process. It means identifying potentially problemmatic situations and events, sorting out the important issues, and identifying the options in handling a particular situation. In this phase of A-D-M, the parent (1) considers what the problem really consists of, (2) identifies her or his own feelings about it, (3) thinks about what the child's feelings are, (4) decides what goals should be pursued, and (5) considers whether to use *environmental control, planning alternatives, and/or advance planning* in taking positive steps to meet the goals. In a sense, *self-structuring is rehearsing*--thinking to yourself about the problem, deciding initially what needs to be done, and rehearsing how to present it to the child so that both sets of needs--the parent's and the child's--are met constructively. "Rehearsing" will help the parent to understand what is actually going on so that she or he can respond empathically and thoughtfully. Anticipating problems and potential solutions allows the parent to avoid frustration, surprise, and anger, and enables her or him to view the situation in a positive light. It also enables the parent to consider how they will present their views as well as what they think the child might feel and say. Through self-structuring the parent will be prepared to handle otherwise tension-producing situations by deciding what the goals are and which decision process is to be most helpful in reaching them.

Step by Step Example:

Eleven year old Susan doesn't like to do her homework and lately has been having more and more difficulty in completing it. She and her father have had nightly arguments about it for the past three weeks since school started and both of them are getting edgy and unhappy. Her father needs to consider what has created this problem, his feelings, Susan's feelings and their goals. Thinking through the problem by *self-structuring, the first step*, brings the following issues to light:

(1) There is no quiet place to do homework. Susan has no quiet place of her own and usually ends up trying to do her homework in front of the TV. The problem is that Susan is not doing her homework. *(Defining The Problem)*

(2) Her father knows he is feeling irritated by their squabbles, but he realizes he is also worried. He's worried that Susan is not learning what she needs to know and that she will be more unhappy as she falls behind in school. *(Father's feelings)*

(3) He recalls some of Susan's comments, realizing that she is upset because she's feeling discouraged and stupid. *(Child's feelings)*

(4) He decides that what he would like to see is Susan working persistently on her homework without being reminded. *(Goals)*

(5) He thinks that he will discuss the problem with her and then together they will agree on how to proceed.

This parent has not yet come to a firm plan to resolve the problem, but he has identified some important factors that will help in the planning. Thinking through and analyzing the situation will clarify feelings and goals so that the parent can handle it wisely for both the child and parent.

Step 2: Decide What To Do

Having identified the problem, feelings, and goals, it is time to decide how to resolve the problem. This step involves *considering the alternatives and choosing* the ones which will help the parent to achieve the goals. Susan's father decided that discussing the problem with Susan herself would be most helpful: he wants to learn more about her viewpoints and he also wants to help her take more responsibility for her own behavior. He sees his role, in this situation, as a guide and later as an aide in carrying out their decisions. In his mind, he anticipates some options: changing her room to include a desk for her own personal use, (an example of *environmental control*), and planning a schedule of work and play with her, (an example of *planning ahead*).

Three ways to head off or solve a problem

A. Environmental Control. *Planning how to adapt the environment to encourage certain behaviors* is exercising environmental control. If Susan's father (and Susan) wish to encourage her to study consistently, they can exercise control by making a study space for Susan--perhaps desk or table, providing adequate lighting, being sure that she has pencils, paper and other study equipment. In their discussion, Susan tells her father she would love to have her own desk and thinks it would help her to concentrate since she would be working in her own room. She is excited at his suggestion and wishes to have him help her design a desk which they will build together out of an old door and low chests of drawers.

With a younger child, the parent would make the decisions as to what is needed and would take the responsibility of checking the supplies. As the child gets older, more of the planning and checking can be shared with the child.

In general, Environmental Control is easy to consider and to implement, but it does require anticipating problems and deciding on goals. Houses and their contents are usually designed to meet adult needs. Parents can be more sensitive to how the home can be adapted to better meet the children's needs as well as to better guide them to more responsible personal management and appropriate independence--such as using hooks for children's coats and placing them low enough so that they are reachable. This allows a young child the opportunity to exercise personal management and consideration for others once the child knows that her job is to hang up her coat everytime she comes in.

Encourage parents to put on their creative "thinking caps" and examine their own home. Chances are that they will find several ways to exercise environmental control to help everyone avoid some unnecessary problems and to live more peacefully. When your children were small, you probably did this automatically, controlling the environment by putting dangerous products out of reach, keeping valuable knick-knacks up high, and so on. As children get older, parents can exercise similar environmental control. Such control over the environment can be used to encourage or promote new interests as well, such as an interest in music, science, painting, or photography. Setting up an area where the child can paint without worry about the mess is a first step.

B. Advance Planning. Advance planning is a decision-making process in which *you and your child think through the problem together ahead of its occurrence and decide on what can be done* to attain the goals and head off a potential problem. Recalling Susan and her father: the two of them would spend time deciding on what needed to be done to her room to make study space, considering alternatives for desk space, planning the room *and how she was to use it*. Advance planning, thus would include *clear communication from her father about his expectations of her*, as "I would like to see you study in your room at a set time every day. I would also like you to do it without my reminding you." *Susan would have a voice in this*, arranging the time best for her, for instance, or noting that a set daily time was impractical given her schedule of meetings and music lessons--but she would like to set up a weekly schedule, with different daily times, about two hours per day during the week.

When a child requests music lessons, when the baseball season is approaching, or when family chores need to be reviewed, the parent should use A-D-M by self-structuring and advance planning to work out satisfactory decisions and solutions. The agreements have to be clear and spelled out so that both child and parent know and can remember what is expected. For example, in deciding on household chores, one family agreed that the children were to be responsible for keeping their bedrooms straightened up. Rather than simply saying, "Keep your room clean," the parents had decided what needed to be done and worked it out with the children by listing exactly what chores were involved and giving accurate and simple instructions. "The floors must be vacuumed, all shoes lined up in the closet, all games packed up and put on the shelf," etc. They used advance planning to decide on when the chores were to be done, as well.

C. Planning Alternatives. Children need variety in their lives just as adults do. Often, squabbles and teasing occur when children are bored and need something interesting to do. *By planning alternatives, the parent can head off the conflicts.* The parent might decide to plan these activities alone, just to have available suggestions and materials before the problems arise. When signs of restlessness occur, children can be involved in planning the alternatives if the parent has done some earlier self-structuring in anticipation of the problem. Children often welcome help in channeling their energies. Helping them to plan alternative activities is one way that many parents have found useful. Examples - Providing games or books on a car trip.

- Planning other activities in case the planned one falls through.
- Offering a variety of choices of household chores--everybody can pitch in with what they would like to do.

Step 3: Carrying Out the Decision

Following the decision-making in which the parent and child has considered and chosen the lines of action, the parent must do the *final planning* about *exactly how to carry out the decisions*. Structuring the situation to carry out the decision involves agreeing on who is to be responsible for carrying out specific tasks, when they will get done, how they will get done, and where they will get done. *Structuring the situation means acting on the decisions*. Therefore, this third step requires making the final plans and carrying them out.

Susan and her father structured the problemmatic studying situation by agreeing to meet the next evening at 8 (after her homework was done) to design the desk, choose colors, and plan on a shopping trip to get necessary materials. Susan agreed to have a weekly plan of study worked out which she would bring to their meeting. It is easy to see that her father could have made all the decisions himself, told her how to organize the room, where to study, and when she could or couldn't watch TV. But he did not have to: Susan was willing to work with him because he showed an interest in her and was willing to listen to her and because he had good suggestions. A-D-M will not always work as easily, but when it becomes a habit and family members learn to think about options, it becomes a valuable problem-solving process.

Of course, the degree to which the child can be involved depends on the age of the child. The younger the child, the more responsibility will be required by the parent. Most 5 year olds, however, can be involved in the A-D-M process.

II. GOALS

A. To teach parents how to recognize and analyze a potential problem and how to select the appropriate decision-making strategy for preventing or alleviating it.

B. To teach parents how to exert environmental control to change the environment for alleviating or avoiding problems by better meeting the needs of the child.

C. To teach parents to plan for and provide alternatives as one method of problem prevention.

D. To teach parents the use of advance planning as a problem prevention and problem-solving strategy.

E. To encourage parents to include the child in the decision-making and final structuring processes as much as possible and to model and use the decision-making process with the child.

III. BEHAVIORAL OBJECTIVES

A. Given a parent-child situation, the parent will use the A-D-M Flow Chart to analyze the problem and apply suitable decision-making strategies for structuring the problem.

B. Using an example from her or his own home experience, the parent will be able to describe how she or he can use A-D-M to prevent or alleviate the problem.

C. The parent will be able to identify positive goals for the child where no problem exists and will be able to apply A-D-M skills to plan how to shape the situation to encourage the child to attain those goals.

IV. KEY CONCEPTS

A. Anticipatory Decision-Making (A-D-M). The analysis of anticipated or actual problems in which a decision-making strategy for resolving the problem is relevant. Appropriate decisions are made about how to prevent or alleviate the problem, and the final structuring of the situation is planned for and carried out in accord with the decisions.

B. Self-structuring. The first step in A-D-M in which the parent more specifically identifies the problem and desirable goals, considers options available for meeting those goals, and selects a decision-making strategy to follow.

C. Decision-making. A thinking and information gathering process in which the individual considers alternatives, reviews the probable outcomes of selecting each alternative, identifies relevant risks and gains, and selects the alternative(s) with the best fit for reaching the goals and meeting needs.

D. Environmental Control. Decision-making about how to adapt the environment (places and people) to encourage certain behaviors to occur, and ultimately to teach responsibility to the child by allowing the child to meet realistic expectations.

E. Advance Planning. A decision-making process in which the parent and child think through the potential problem to decide on desirable goals and ways of facilitating their occurrence.

F. Planning Alternatives. Decision-making about alternative activities to have available when boredom, frustration, or disappointment are likely to occur or in order to "head off" a potential problem.

G. Structuring. Setting up the situation and carrying out the plan to alleviate or solve a problem. It is creating the situation so that the desirable behavior is more likely to occur.

H. Reinforcing Desirable Behaviors. Immediate and consistent acknowledgement of the occurrence of the positive behaviors the parent wished to encourage through praising the child's work ("good work," "good singing"), giving an "I-Message" ("I'm proud of you for picking up all your clothes," "I like it that you painted that picture all by yourself in the art corner") encouragement ("Keep trying," "I trust you," "You deserve to be proud of yourself"), and empathic responding ("You're pretty happy about that," "Looks like we're both pleased").

V. PRINCIPLES TO EMPHASIZE

A. *Children's behaviors are often shaped and structured by their environment*, that is, by the ways their home, schoolroom, and playyard are set up and by the ways that other people act towards them.

B. Children will be motivated to behave in desirable ways if the environment is *designed to encourage and facilitate* those behaviors and, especially, if they are *involved in the decision-making processes*.

C. Parents can and should try to *anticipate problems and make decisions* about how to structure the situation or event to either prevent a foreseeable problem or to resolve an already experienced problem.

D. Through anticipatory decision-making, parents can promote positive behaviors as well by *deciding what behaviors they would like to encourage and how they can plan the situation* to shape the child's behavior: in many instances, the child can be involved in deciding how to proceed.

E. *Including the child* in the decision-making and planning is desirable and useful, both because the child will be more willing to carry out the decisions if she or he took part in making them and also because she or he will be learning decision-making skills.

F. When the desired behavior(s) occurs, the parent should be sure to *acknowledge it* through praise, encouragement, or giving "I-Messages." If not acknowledged, the child is likely to think that the parent does not care or has different expectations.

VI. MATERIALS NEEDED

A. Leader's Manual: Anticipatory Decision-Making Flow Chart (page 129), Anticipatory Decision-Making Practice Situations (page 130), and 3 x 5 cards with practice situations typed or written on them.

B. Blackboard and chalk.

VII. LEADER PREPARATION

A. Read the Overview for Unit III, the introduction to Session 5, "*Anticipatory Decision-Making*," and the parent reading, "*Anticipatory Decision-Making*," for session 5 in the Parent Workbook.

B. Prepare your talk on the rationale for positive, preventive problem-solving after reviewing the key concepts and main principles.

C. Become familiar with session procedure and materials; complete the homework yourself to get a feel for the issues and difficulties that are likely to come up in class which you will want to anticipate; work out a time schedule for the activities.

D. Review the previous Home Activities and the concepts and principles of giving "I-Messages."

VIII. GENERAL FORMAT

A. Review Homework

B. Introduction to Positive Problem-solving through A-D-M

1. Rationale
2. Discussion of Concepts.

D. Skill Practice

1. Self-structuring

2. Small Group Activities
3. Personal Experiences
4. How to Reinforce Desirable Behavior

D. Summary and Home Activities

IX. SESSION PROCEDURE

A. Review Homework: Giving "I-Messages"

1. Solicit questions, using the discussion as a base for repeating and illustrating the concepts and principles involved in giving "I-Messages".
2. Role play some of their personal examples in part III, "Your Own "I-Messages."
3. Other suggestions: Have ~~one~~ parent describe the situation and ask other parents to give "I-Message" responses for that particular situation.

B. Introduction to positive problem-solving through A-D-M

1. Introduce the rationale for positive problem-solving through A-D-M. Stress the principles and give many examples. Briefly describe the entire decision-making process, from self-structuring through final structuring and use the A-D-M Flow Chart as a guide on the blackboard.
2. Discuss the concept. Keep the discussion on the subject--positive prevention of problems--and discourage the sharing of cute stories about children, something that easily occurs in this session. When such stories do come up, make use of them to get the discussion back on the track by pointing out how they illustrate one or more of the concepts or how they as parents might have better set-up the situation or their own behavior by using one of the parenting skills, i.e. empathic responding, "I-Messages" or problem-solving skills.

C. Skill Practice

1. Self-Structuring
   a. Read three or four parent-child A-D-M Practice Situations. Ask parents to discuss how they would apply A-D-M skills to each one. Go through each step of Self-Structuring on the Flow Chart (page 129). Guide them through the steps, clearly pointing out the elements in each step. Use the blackboard to write down their suggestions.

b. In the second part, Deciding What To Do, have parents generate as many different plans as they can think of. Offer some of the alternatives that you personally might consider and those suggested on the practice sheet if they are not spontaneously suggested.

c. When they approach the final structuring step, have the parents consider what would be needed to implement the decisions, such as clear instructions to the child or purchases of new equipment made with the child.

d. Use the A-D-M Flow Chart to remind the group of the procedures. Each parent can refer to it in her or his own workbook, (page 53).

2. Small Group Activities

a. Before class, write or type several A-D-M practice situations on 3 x 5 cards. Prepare one for every 2 or 3 people in the class. Hand out one 3 x 5 card situation to each group member and then have the group break up into dyads or triads. Ask them to discuss how to use the A-D-M process to resolve or prevent the problem depicted on their cards. They should use the A-D-M Flow Chart.

b. Suggest that the group select the most difficult situation and role-play it. Have them switch roles, noting where they had difficulty themselves and observing how another parent would use the process.

c. Discuss these experiences with the entire class.

3. Personal Experiences

a. Ask for each parent to recall a problemmatic situation. In turn, discuss first how the parent originally dealt with it (or failed to) and then how the parent would apply A-D-M to it now. Solicit suggestions from other parents as well.

b. Have each parent identify positive goals for their target child. Ask them to go through the self-structuring step, writing down their thoughts. Then, have volunteers share their goals and self-structured thinking. Discuss alternatives in the group.

c. Choose one or two parents, or ask for volunteers, to role-play advance planning using their personal goals or problems.

Help the parents to be (1) sensitive to the child's view, (2) very clear in stating expectations and instructions, and (3) to be accepting and firm rather than authoritarian.

4. How to Reinforce Desirable Behavior
    a. Discuss how a parent might acknowledge and reinforce the occurrence of desirable behaviors, the very last step in the A-D-M process: Examples--praising the task's completion, "I-Messages", encouragement, good listening. Give examples of each.
    b. Have parents practice this step in their role plays. Be sure to reinforce them for including it.

D. Summary and Home Activities

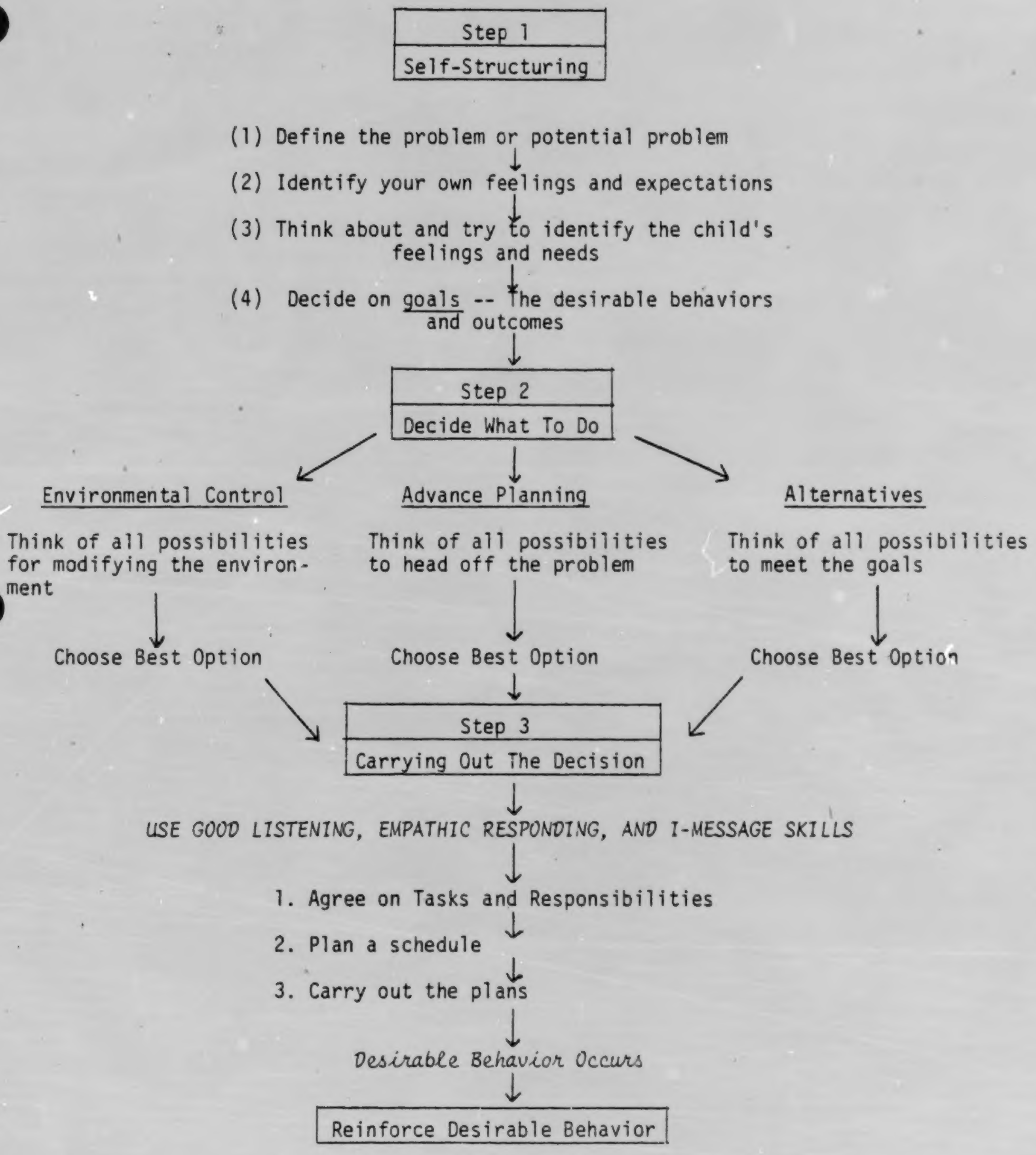
1. Review the session, stressing the important principles (to anticipate as much as possible, to apply decision-making skills to problemmatic areas, and to include the child whenever reasonable). Make sure that no discussion issues are left unfinished and that you have attended to each parent's concerns.
2. Give the assignment for Session 6: Reading "Problem-solving Through Positive Guidance" and Home Activities 5, "Anticipatory Decision-Making." Go over the instructions and clarify questions. Stress the importance of the home activities: actual at-home practice pays off. Applying the skills and discussing the experiences is invaluable to learning them.

X. RESOURCES

A. Evans, K. L., D'Augelli, J. F. and Branca, M. C. Decisions Are Possible. University Park, Pa.: Addictions Prevention Laboratory, The Pennsylvania State University, 1976.

B. Guerney, Louise F. Foster Parent Training Program. University Park, Pa.: Center for The Development of Human Services, The Pennsylvania State University, 1975.

ANTICIPATORY DECISION-MAKING FLOW CHART



Step 1

Self-Structuring

(1) Define the problem or potential problem

(2) Identify your own feelings and expectations

(3) Think about and try to identify the child's feelings and needs

(4) Decide on goals -- the desirable behaviors and outcomes

Step 2

Decide What To Do

Environmental Control

Think of all possibilities for modifying the environment

Choose Best Option

Advance Planning

Think of all possibilities to head off the problem

Choose Best Option

Alternatives

Think of all possibilities to meet the goals

Choose Best Option

Step 3

Carrying Out The Decision

USE GOOD LISTENING, EMPATHIC RESPONDING, AND I-MESSAGE SKILLS

1. Agree on Tasks and Responsibilities
2. Plan a schedule
3. Carry out the plans

Desirable Behavior Occurs

Reinforce Desirable Behavior

PRACTICE SITUATIONS FOR ANTICIPATORY DECISION-MAKING

To the Leader:

Here are several situations for use in skill practice of Anticipatory Decision-Making with the parents. The accompanying notes regarding self-structuring and decision-making strategies are some suggestions presented in outline form, useful for guiding the discussion. However, they are certainly not the only possible alternatives, nor do they represent "the correct answer." You, as leader, may wish to note your own thoughts as you would use the Anticipatory Decision-Making process with each situation.

SITUATION	SELF STRUCTURING	DECIDING WHAT TO DO
1. Bob, age 11, has trouble waking up. He never seems to hear his mother call him in the morning. What would you do in this problematic situation?	Problem: *Getting Bob up on time* Own Feelings: *Annoyed, at the continuing problem, frustrated because nothing changes.* Bob's Feelings: *Feels nagged at, feels rushed and pushed.* Goals: *To get Bob up on time every morning for school; to help him learn how to be responsible for himself in the morning.*	Environmental Control: *Provide alarm clock* Planning Alternatives: *Earlier bedtime on school nights.* Advance Planning: *Identify the problem as you see it, discuss your own feelings and elicit his ideas on resolving it. Communicate to him that you will no longer take the responsibility of waking him up and seeing that he gets to school on time; that this will be his own responsibility. What ways can the two of you agree on how to structure the situation so he will be able to take responsibility for getting up and out on time?* (Note: *Logical consequence enforcement: being late to school without a note if he does not get himself prepared.*) *Planning can include alarm clock, setting out own clothes the night before, having lunch prepared or preparing it the night before and so on.*

SITUATION	SELF STRUCTURING	DECIDING WHAT TO DO
2. Sally, age 12, continues to leave her clothes and toys all over the bedroom. When her parents ask her to be more faithful about keeping up her room, she replies that there is no place to put anything. She may be right.	Problem: *Keeping Sally's room clean, reducing the number of arguments about what "neat" means.* Own Feelings: *discouragement, futility.* Sally's Feelings: *frustration, annoyance.* Goals: *To help Sally structure her room to keep it neat, to define "neatness" together, to help Sally learn how to organize herself.*	Environmental Control: *Build more shelves for her books and toy collection, buy storage boxes for her toys and school papers, give her a hamper in which she will put her clothes, provide large hooks for her to hang her robe, jacket, and rainwear on, and so on.* Planning Alternatives: *Parent will agree to clean and straighten room on a weekly basis if Sally's working in the garden or yard.* Advance Planning: *Discuss with Sally how she thinks "neatness" is defined and how she feels she can maintain a neat room. Ask for her suggestions, offering some of your own as in exerting environmental control. Make decisions about how to structure her room, and agree on responsibilities for each week. Make a list together.*

SITUATION	SELF STRUCTURING	DECIDING WHAT TO DO
3. Veronica and James, aged 11 and 9, have been asking questions about drugs. They are curious about marijuana and tobacco and want to know what they are and what all the fuss is about.	Problem: *The kids want information about drugs which you are not completely familiar with. You are unsure of how to proceed or how much to tell them.* Own Feelings: *Nervous about what they know and why they want to know more, unsure about own attitude about use of marijuana or tobacco, for that matter.* Their Feelings: *Eager to learn, curious about parents' feelings and points of view, concerned about knowing as much as their friends.* Goals: *To give the children accurate information about the drugs, to discuss their current knowledge and attitudes, to use this opportunity to structure a continuing process of learning and discussion about drugs, their uses and effects.*	Environmental Control: *Provide books available for their age group.* Planning Alternatives: *Confer with their teachers to see what drug education efforts are taking place in class; discuss how the teachers might help in finding and providing accurate information.* Advance Planning: *Discuss with Veronica and James their interest in learning more and share your own feelings. Suggest different ways of finding out information and of setting up family time to read and talk about the material. As a family sending for books from federal and state clearinghouses, finding out about films, seeking out parent and child discussion groups, and planning how to use all the available resources would be a part of this.*

SITUATION	SELF STRUCTURING	DECIDING WHAT TO DO
4. Karen, age 8, loves creative art and crafts but always seems to make such a mess of her clothes, the floor, and the room in general. Her father wants to encourage her artistic skills and interests and still avoid the mess. How can you use anticipatory structuring to resolve the problem.	Problem: *Allowing Karen the freedom to create and "mess up" without damaging the room and furniture.* Own Feelings: *Eager to see Karen freely working and creating, upset about the general mess left even though Karen tries to clean up, anxious.* Karen's Feelings: *Willing to help in maintaining order, excited about painting and using clay, worried that she will make you angry by messing up.* Goals: *To help Karen set up her room so that she has the freedom to be creatively messy and yet can easily clean up; to reinforce her artistic interests and encourage her to continue.*	Environmental Control: *Build a "painting nook" in her room specially built with easy-care formica and linoleum and big enough for her to work in.* - *Provide plastic drop-cloths for the floor and table, the necessary clean-up tools (rags, sponge, water bucket, waste basket, and so on).* - *Set up an "art gallery" of her paintings and sculptures, with changing "exhibits."* Planning Alternatives: - *Suggest that she use crayons and construction paper cutouts when it is particularly important to have a fast clean-up.* - *Plan a weekly art "show and tell" with the whole family on a certain night as a reinforcement to her, to demonstrate interest and offer constructive suggestions.* Advance Planning: - *Discuss the situation with her and review options to arrive at a solution--how she thinks she might structure her situation to be less sloppy. Share your expectations and hopes. Help her to plan appropriate ways of dealing with messy activities and clean-up responsibilities. Use environmental control suggestions with her and see what she thinks.*

SITUATION	SELF STRUCTURING	DECIDING WHAT TO DO
5. Everytime Scott, age 6, goes out with his parents to visit some good friends, he gets restless and whines to go home. What can the parents do in this situation?	Problem: *Scott loses interest and becomes quickly bored in an adult situation.* Own Feelings: *Resentful, bothered, somewhat embarrassed.* Scott's Feelings: *Displeasure, boredom, wishes to be actively engaged in something interesting.* Goals: *To make each visit a pleasant one for both you and Scott, to shape the situation so that Scott has his activities and you have options to offer him from time to time.*	Environmental Control: *Take along supply of toys which he can play with.* Planning Alternatives: *Plan for him to take a nap at sometime during the visit, and follow it by a snack.* Advance Planning: *Discuss your needs and expectations with him beforehand, in concrete terms, telling him how you would like him to act, and discussing the effects of his behavior on you, your friends, and himself. Decide together on games and toys he would like brought along to play with.*
6. Jim, age 13, has an appetite that never seems to be satisfied and he eats things that you want to save for later needs or for guests.	Problem: *You don't object to Jim's eating but you do object to his eating the food you want to save.* Own Feelings: *Angry when the food you planned to use is not there for use, annoyance at yourself for not being more clear about your needs.* Jim's Feelings: *Sorry he eats the food you save but at a loss as to how to know which is okay to eat and which is not, a bit embarrassed at his appetite.* Goals: *To make expectations and needs clear to Jim and yourself, to reassure him that his appetite is expected at his age and stage of growth.*	Environmental Control: - *Put some sign or note on those foods that you are saving for later use.* - *Keep a snack box in the refrigerator.* Planning Alternatives: *Provide nutritious snacking food that Jim knows is for him.* Advance Planning: *Discuss the problem with him and decide together on useful steps to structure the situation so that both of you will have your needs met. Offer options as above, and include the possibility of his planning snack menus prior to food shopping.*

SITUATION	SELF STRUCTURING	DECIDING WHAT TO DO
7. It is time for John, age 8 to go on his first visit to the eye doctor. He has been resistant to going to doctors, in general, and puts up a fuss.	Problem: *Getting John to go to the eye doctor without a fight.* Own Feelings: *Worried that you will get so angry at him that you will make the situation a lot worse than it has to be.* John's Feelings: *Nervous and scared.* Goal: *To help John understand what an eye examination is like and how it differs from other physical exams, to reduce John's anxiety and your own tendency to blow up when he expresses worry.*	Environmental Control: *Provide a book that explains a visit to the eye doctor.* Planning Alternatives: *Be sure he is rested and has a positive activity scheduled following the examination.* Advance Planning: *Discuss his fears and fantasies with him, and let him know what he can realistically expect (e.g., no shots but probably eye drops that will make his vision blurry.) Plan to read an explanatory book together about the visit to an eye doctor, seek out pamphlets to help him learn about eye care and the importance of visual exams, and perhaps plan a visit to the office prior to the exam to introduce him to the place and the people. Decide together what to do and then structure the situation to carry it out.*

SESSION 6
POSITIVE GUIDANCE

I. INTRODUCTION

This second session on problem prevention and problem-solving in the family focuses on positive ways for parents to help children learn responsibility for their own behavior. The leader's task is to facilitate the difficult transition between negative guidance--that is, punishment, coercion, and arbitrary rules--and Positive Guidance which stresses *clarity in expectations, using logical consequences, encouragement* for doing well and for trying, and *positively stated house rules.*

Many parents view their role as necessitating almost endless correction of the child, usually through coercion, threats, and non-related punishments. A parent's role, however, is one of *guidance*, emphasizing what the child does which is right, good, or desirable. The parent guides by being clear about realistic expectations, making those expectations clearly known to the child, helping the child to know how to carry them out, and guiding the child to make constructive decisions about how to act by anticipating the positive or negative logical consequences of her or his behavior. The parent then *allows the child to learn through experience--experiencing the consequences of her or his decision.* Exceptions occur when health or safety are clearly threatened. In those cases, the establishment of a rule is wise. Throughout, the parent maintains a belief in the child's abilities, providing sufficient encouragement and reinforcement to not only motivate the child to continue acting appropriately but also to guide the child's understanding of what is appropriate and pleasing to the parent.

Facilitating the use of Positive Guidance and A-D-M in cooperation with the child is the rationale for suggesting the establishment of a weekly family meeting. Parents often find such meetings, when held on a consistent basis, to be constructive in identifying and hashing out problems which arise or are anticipated. Children learn much about other people's feelings and points of view through such meetings. They also learn to confront problemmatic situations openly and how to resolve problems through shared and personal decision-making processes.

In introducing these concepts, care has to be taken not to put parents on the defensive. Rather, the approach is one of suggesting new alternatives in attitudes and behaviors that are effective in guiding children's learning and reducing resentment between parents and their children. Disciplining children is a tough job, made tougher by the narrowed understanding of the goals of discipline. The leader's role in this session is to broaden parental understanding of the concept of discipline, to teach specific skills for constructive discipline, and to give support and encouragement to parents in resolving problems through positive guidance.

II. GOALS

A. To broaden parents' understanding of the concept of discipline in the context of problem-solving in the family.

B. To sensitize parents to possibilities for positive guidance in their families.

C. To teach parents how to implement positive guidance through the use of logical consequences, proper timing and use of house rules, and encouragement.

D. To suggest to parents the constructive utility of The Family Meeting as a regular setting for teaching Anticipatory Decision-Making and Positive Guidance to children.

III. BEHAVIORAL OBJECTIVES

A. Parents will define discipline in positive, educational terms.

B. Parents will distinguish punishment from positive guidance.

C. Parents will analyze a personal problem situation, identify the desired behavior, logical consequences, and preferable behaviors to encourage, and will formulate a plan of action to carry it out.

D. Parents will define conditions under which a house rule may be necessary and will be able to formulate effective house rules.

E. Parents will indicate a willingness to try out the Family Meetings.

IV. KEY CONCEPTS

A. Positive guidance. Disciplining a child through teaching what is right, preferable, and appropriate by means of making expectations realistic and clear, guiding the child to make constructive decisions, and allowing the child to experience the logical consequences of those decisions.

B. Logical consequence. What happens as a direct result of one's own behavior; logical consequences can be positive, such as getting a warm hug after telling someone you love her, or negative, such as a cold dinner if the child comes home later than the agreed upon time.

C. Self-fulfilling prophecy. Encouraging a particular outcome or behavior by means of expecting it to occur and acting in such a way as to make it occur. This is usually used in reference to undesired outcomes, such as expecting a child to do poorly in school: when a parent believes that the child will do poorly, she or he conveys this belief to the child and does little or nothing to promote success. Indeed, often the messages to the child are direct discouragements.

D. Encouragement. Positive support given to the child when the desired behavior occurs or when small but appropriate steps towards the desired behavior occur; receiving encouragement for appropriate behavior is a positive logical consequence.

E. Rule. A parent-imposed statement of what is expected within the boundaries of the family's needs and values; a guide which limits the behavior of the child within specified boundaries and includes an enforceable, logical or related consequence that the child will experience if she or he ignores the rule.

Example: Bicycle left in middle of driveway where cars must go--> removal of bicycle-riding privileges.

F. Family meeting. A regularly scheduled family gathering in which all members participate to resolve problems and to make decisions to prevent anticipated problems.

V. PRINCIPLES TO EMPHASIZE

A. Positive guidance is *an attitude* as well as *a skillful way of behaving* based upon the belief that each person can be and is responsible for her or his behavior.

B. Discipline means *teaching and learning*, not punishing; it is best thought of as training or developing by instruction and the exercise of positive guidance.

C. A parent's beliefs about how a child will behave has much to do with how the child actually does behave, in the sense of the *self-fulfilling prophecy*. Children pick up and act on the messages from their parents communicated through nonverbal signs and behavior. If a parent emphasizes the negative, the child will too; if the parent emphasizes the positive, it makes it more likely that the child will as well.

D. For parents to resolve or avoid problems through positive guidance, it is important for them to *understand their goals* for the child (and the parent-child relationship) and to keep them in *realistic perspective* Keeping the "total picture" in mind, helps to ease day-to-day difficulties.

E. Positive guidance *promotes the achievement of parental goals*, helping parent and child to focus on what is "right," preferable, or appropriate. The larger goal is to help the child take responsibility for her or his behavior and the internal control of that behavior. Too many externally imposed rules are unlikely to foster internal control.

F. Punishment involves *arbitrary, unrelated consequences* imposed by the parent for nonpreferred or inappropriate behaviors with the goal of pointing out what was wrong. It may have the effect of stopping the behavior for the moment, but seldom prevents the reoccurrence of such behavior because it does not provide a guide to more appropriate behavior. In addition, punishment builds resentment and anger because of its arbitrary nature.

G. Enforcing logical consequences is a positive guidance method which creates an environment in which the child is *helped to take responsibility for her or his own behavior*. It does this by encouraging the child, through the parent's guidance, in thinking through the consequences to make her or his own decisions about which consequences to accept.

H. Imposing a rule with its parent-originated logical consequences is a last resort, following the consideration of family communication skills, Anticipatory Decision-Making, logical consequences, and encouragement individually or in family meetings. Rules should be *kept to a minmum*, should be enforceable and must be *consistently enforced*.

I. Positive guidance, like anticipatory decision-making, needs to be carefully considered and *planned* before carrying it out. Decisions made should be discussed with the child.

VI. MATERIALS NEEDED

A. Blackboard, chalk

VII. LEADER PREPARATION

A. Read "*Problem-Solving Through Positive Guidance*" in the *Parent Workbook* and the Introduction to Session #6 in the leader's manual.

B. On the basis of your reading, prepare your discussion of the rationale and principles of positive guidance; prepare a time schedule for the activities.

C. Review Home Activities #5, "*Anticipatory Decision-Making.*" Think about useful discussion questions and important points to highlight.

VIII. GENERAL FORMAT

A. Review Home Activities #5

B. Introduce Principles of Positive Guidance

  1. Rationale
  2. Discussion and questions
  3. Principles of Positive Guidance

C. Practice in Positive Guidance

D. Summary and Home Activities

IX. SESSION PROCEDURE

A. Review Home Activities #5

1. Ask for participants' reactions to the assignment.
    a. Be sensitive to discouragement and frustration in implementing the procedures for Anticipatory Decision-Making. Review and clarify where necessary.
    b. Repeat as needed the principle that skills require time to develop and much practice in carrying out, reviewing, and trying again.
2. Go over the responses to each item.
    a. Continue to review the principles and methods.
    b. Have several parents describe their experiences in applying A-D-M with their target child.
        1) What were the successes?
        2) What were the problems?
        3) Use A-D-M skills to decide on resolving the problems (and, perhaps, continuing the successes).
    c. Reinforce their efforts and their motivation to try these new skills. Reinforce small steps in the desirable direction.

B. Introduce Principles of Positive Guidance

1. Rationale
    a. Define positive guidance.
    b. Contrast it with punishment and give examples.
    c. Present the reasons for its greater effectiveness and success in teaching and training the child.
2. Discussion and questions
    a. You may wish to ask parents for their definitions of guidance, punishment, discipline.
    b. It would be useful to encourage parents to clarify their goals in disciplining children. Demonstrate the greater utility of positive guidance for effecting these goals.

    Discussion question: Does a typical punishment (e.g. a spanking) help the child to learn responsibility for her or his behavior?

c. Ask parents to consider how much they reflect on their plans and purposes in discipline: chances are that most react immediately in a given situation and may not be effective in helping the child to understand the goals and "lessons." Positive Guidance, on the other hand, encourages clarification of goals, expectations, and planning to attain what is realistic.

Discussion question: How can discipline be preventive instead of after-the-fact?

d. Discuss The Family Meeting as a regular way of carrying out A-D-M and Positive Guidance with all members.

3. Principles of Positive Guidance

a. Discussion of logical consequences.

1) Have parents define the concept and give examples, both negative and positive.

2) Introduce the relevant principles in using and formulating logical consequences.

b. Discussion of encouragement.

1) Ask parents to suggest ways of being supportive and reinforcing of children's attempts to act appropriately.

2) Try to elicit principles of encouragement from the parents; summarize the discussion. Solicit examples from parents.

3) Show how encouragement is a necessary and positive element of discipline. Give examples.

c. Discussion of rules.

1) Review the purposes for rules and the conditions under which the rules may be imposed.

2) Go over the criteria for formulating a rule:

a) Review *necessity*: Is the rule necessary? or Can the problem be solved in another way?

b) A rule is stated in *clear, specific terms*.

Examples - Chasing each other can be done outside.
No chasing is allowed in the house.
- Three bites of all the foods served is the rule.

c) A rule must have an *enforceable related consequence.* If the consequence cannot be enforced, the rule will not be effective.

Unenforceable: "Running into the street is against our rule: No running in the street because it's dangerous. If you run into the streets you'll have to stay in the house for a week." (An unrealistic consequence.)

Enforceable: "Running into the street is against our rule: No running in the street because it's dangerous. You will be restricted to playing in our back yard only--no friend's houses--for two days if you run into the street."

Unenforceable: "The rule is that muddy shoes are taken off at the door. If you don't, you will have to go to bed early."

Enforceable: "The rule is that muddy shoes are taken off at the door. If you track mud on the floor, you must clean it up."

C. Practice in Positive Guidance

1. Problem Analysis Practice
    a. Using Positive Guidance Practice Situations (page 152), help the parents to go through several situations step by step, as shown on the Flow Chart.
    b. There may be several skills that should be used in conclusion to resolve a given problem: There is no one right solution. Also, there may be several viable solutions--encourage many suggestions.
    c. Continue to reiterate the principles and encourage the "building block" learning approach. That is, each skill is built upon and related to the previous skills.
2. Formulating logical consequences
    a. Using situations from the Practice Situations, ask parents to identify logical consequences for a situation or two.

b. Divide the group into triads.
   1) Read another practice situation and ask each triad to analyze the problem and decide on the best solution.
   2) Ask each triad to role play their plan. One parent will be the "parent," one the "child," and the third the observer. The observer will give feedback--encouragement and helpful suggestions.
   3) Discuss reactions and ideas with the entire class.

3. Formulating Rules
   a. Review two or three situations in which rules may be necessary and ask the group to justify the rule, formulate it correctly, and suggest relevant consequences. (Number 2, 4 and 11 are good situations for rule setting.)
   b. Role play a parent discussing a new rule with a child, demonstrating the skillful and constructive use of all skills in doing so.

D. Summary and Home Activities

1. Review the session, its goals and activities.
   a. Summarize the critical points.
   b. Encourage parents to try out the skills at home with their children.
2. Assign the home reading for Session #7, "*Drug Education in the Family*," and Home Activities #6, "*Practice in Positive Guidance*." Go over the instructions to clarify any misunderstandings.

X. ADDITIONAL SUGGESTIONS

A. This class session will involve much discussion, perhaps more than usual. In order for parents to consider positive guidance as a viable alternative, particularly the use of logical consequences, they will need to discuss it at length. This is an important facet of the attitude change process underlying the program and is to be encouraged. However, it is important to keep the discussion to the issues at hand and to maintain some time boundaries: there is much to accomplish in the two hours available.

B. Parents may be argumentive about and some even adamantly resistant to positive guidance concepts. Some parents believe that if they do not keep tight control of their children through punishment, the child will surely "go bad." "Sounds good on paper but won't work for me" may also be a commonly expressed sentiment. Be alert to their uncertainties and doubts, using your own good listening skills to help them explore the issues. Often, the variety of attitudes in the group will resolve some ambiguities. The leader need not feel it necessary to defend the skills. Rather, suggest that the parents experiment--for instance, suggest that they try logical consequences for a week or two even though it may not seem workable to them.

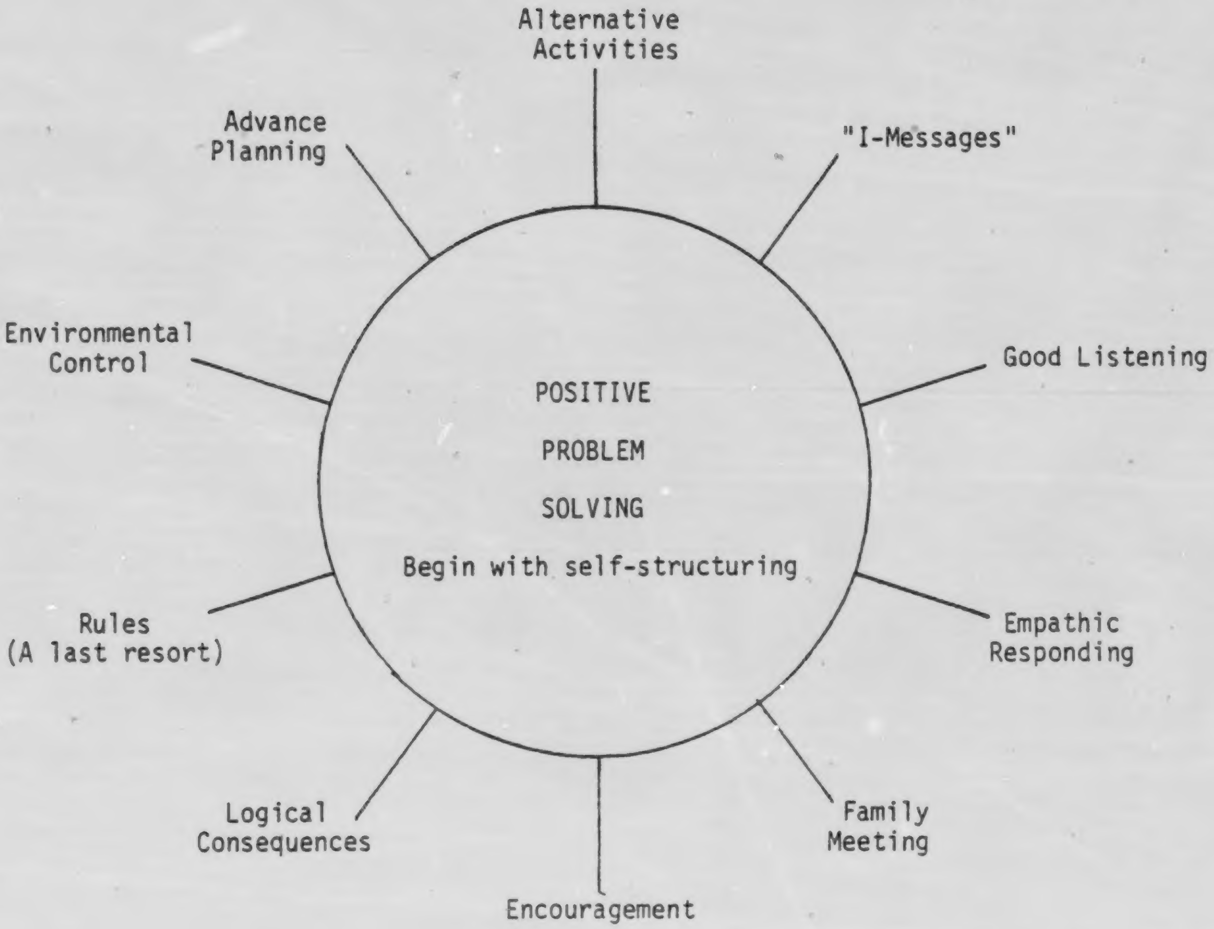
The important message to get across is twofold. First, each parent must find her or his own best methods of parenting. Second, principles, suggestions, and alternative behaviors presented in this program have been helpful for many other parents. Participants are encouraged to learn and try out all the skills and then decide how they can best utilize what they have learned.

XI. RESOURCES

A. Dreikurs, R. and Grey, L. A Parents' Guide to Child Discipline. New York: Hawthorn Books, 1970.

B. Guerney, L. F. Foster Parent Training Program. University Park, Pa.: Center for the Development of Human Services, The Pennsylvania State University, 1975.

TEN PROBLEM SOLVING SKILLS



One single skill is often not adequate.
Parents can use several skills in combination to solve problems.

Positive Guidance Practice Situations

Note to Leader: These situations are intended especially for logical consequence practice but can also be used for other Positive Guidance skill practice. You may wish to use them for Anticipatory Decision-Making practice as well.

1. Ten year old John has trouble getting up every morning for school. Mother is sick and tired of calling him several times each morning.

2. Nine year old Sue is careless about leaving her money lay around. Then she becomes upset when she thinks somebody has taken her money. She accuses other family members of taking her money and it creates a problem for everybody.

3. Ted agreed to mow the lawn on Saturday morning. He has plans to go to a movie with a friend in the afternoon and there is no sign of his getting the lawn done. What would you do?

4. Your fifteen year old is allowed to date on Saturday nights. You believe that she should be home by 11:00 p.m. How will you establish and enforce this rule?

5. Five year old Sally balks at picking up her toys. What is a logical consequence in this situation. How will you handle this situation and what would you do?

6. Both Jeff and Scott have trouble keeping track of their mittens. In fact, quite a few pairs have already been lost. Their parents buy them new mittens and say, "Now, don't you dare lose these." It doesn't seem to help. What is the problem? How can it be solved?

7. Ten and twelve year old Susan and John are supposed to clear the table and do the dishes each evening. They almost always need reminding and in fact nagging to do the task. What logical consequence might help the situation?

8. Eric, age eight, is a picky eater. He only wants to eat desserts and strawberry jam sandwiches. Each meal he complains about the food he doesn't like and mother prepares a jam sandwich for him. After all, she doesn't want him to starve. What is the problem? How would a logical consequence be helpful here?

9. Four year old Cathy wants to look at the toys in the toy department. You have already been there for fifteen minutes and you need to get home now. She stamps her feet and cries--making a loud scene. What should the mother do?

10. Nine year old Steven dawdles at home and in school. He usually is behind in his school assignments because he is day dreaming rather than working. Can you think of ways to get Steven to work more attentively? Discuss the plan you would make.

11. You have just found your child lighting matches behind the house. This is the second time in a week. Should you set a rule or use logical consequences? Discuss this problem.

12. Gail and Sandy are fighting over what to watch on TV. The arguing is loud and the girls are each trying to get mother to punish the other one. What's the logical consequence here? What would you say to your daughters?

UNIT IV

DRUG EDUCATION IN THE FAMILY

Drug Education in the Family*

OVERVIEW

Drugs are omnipresent in the American culture. Alcohol, nicotine, caffeine, vitamins, diet pills, aspirin, sleeping pills, cough medicines, laxatives and currently marijuana are predominant. In studying the epidemiology of drug use, one researcher noted that "the United States is a drug-using culture. On any given day an American adult is likely to ingest 4-5 identifiable chemical compounds that are pharmaceutical in nature. Consider the individual who arises in the morning, brushes his teeth with toothpaste containing flouride, downs a Bromoseltzer, has two cups of coffee containing caffeine, takes a dexedrine to help him with his weight control problem, lights his post-coffee cigarette containing nicotine and heads for a round of events in the business or professional world which may include cocktails and wine with meals followed by brandy and a good cigar--this individual is more likely to be typical than unusual. While for the most part individual adults do not get into trouble through their use of drugs, some unfortunates do experience complications--social and medical."[1] Misuse of prescription drugs, through self-diagnosis or deliberate use of certain drugs for nonmedicinal purposes, is widespread but frequently overlooked. Lennard and associates[2] note that current concerns wrongly stress misuse of psychoactive drugs by young people, especially those illegally purchased, while ignoring the steadily increasing use and misuse of prescribed and over-the-counter psychoactive drugs in the general society. It would be accurate to state that licit drugs are at least as great a problem as illicit drugs, and alcohol is probably the drug of greatest abuse. This is not to say that use and abuse of illicit drugs--marijuana, hallucinogens, barbiturates, amphetamines, and narcotics such as heroin and cocaine--is not of concern. Estimates of use generally suggest that there are 7 million experimenters,

[1] Lipscomb, W. R. An Epidemiology of Drug Use-Abuse. Journal of Public Health, 61, 1971, 1794-1800.

[2] Lennard, H. L., et al. Mystification and Drug Misuse. San Francisco: Jossey-Bass, Inc., 1971.

*D'Augelli, J. Frankel and Weener, J. M. Do As I Do: The Parent's Role in Alcohol Abuse Prevention. University Park, Pa.: Continuing Education Press, 1975.

5 million moderate users, and 3 million chronic users of illegal drugs.[3] Put into perspective however--70 million people drink alcohol, with 7 million seriously alcoholic,[4] 70 million smoke, and 1 million teenagers begin smoking every year[5]--the drug dilemma is that the culture itself is a drug-oriented one. It is therefore unlikely that most children will abstain from all use of drugs.

The accepted and typical standard for drug behavior in our society is *use in moderation.* The conditions under which use of drugs is acceptable include a variety of social and recreational situations and medicinal necessity. Using drugs, especially liquor, to relax, is considered okay. *Using drugs responsibly,* so that the individual is not drug dependent nor likely to become drug dependent, is the common goal. Dependence is subtle, however. It may be that the adult who has two or three beers every day before dinner is in some important ways more emotionally needy than the adult who has two or three beers after mowing the lawn on a hot day. Similarly, the parent who takes a sleeping tablet to get to sleep and who drinks three cups of coffee in the morning to get going is modeling different drug use standards--and values--than one who keeps sleeping tablets in the house for occasional, specified use. The parent who smokes a pack of cigarettes a day is communicating different attitudes about drug use and dependency than one who uses one pack a week.

The goal in these sessions is not to make value judgments about parents' drug use behavior and attitudes. Rather, it is to enable parents to examine their behaviors, attitudes, and standards, to clarify their own thinking, and decide *for themselves* what responsible drug use is and how to communicate those beliefs to their children.

Parents influence the behavior and attitudes of children in many ways, directly and indirectly. One of the most important ways in which children learn is through *modeling* the important adults around them. They *imitate* the behavior of their parents: the person whom the child imitates is called *the model.* Any behavior which the child may "copy" or imitate is called *modeling behavior.* Modeling also involves the learning of attitudes or values which are implicit in the behavior observed: children learn attitudes towards other people, toward themselves, towards drugs, towards work, and so on through observing their parents' behaviors--both verbal and physical.

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[3] Yolles, S. F. Prevention of Drug Abuse. Resource Book for Drug Abuse Education, Washington, D.C., 1969, NIMH.

[4] Mullin, L. Alcohol Education: The School's Responsibility. Journal of School Health, 38, 518-522, 1968.

[5] Laun, W. L. Priority Topics for Inclusion in Health Instruction Programs. Illinois Journal of Education, 60, 1969, 12-18.

Parents serve as models probably far more often than is realized and children imitate both the good (valued) and not-so-good (nonvalued) behavior of parents. What the parent does is more powerful than what the parent says should be done. For example, the child may like to imitate his parents warmth and acceptance (nurturance) by being nurturant with his/her dolls, pet animals or siblings: the parent would approve of this imitating behavior. On the other hand, if the child lies to a friend ("I can't play with you because I am sick") to get out of a bind after observing the parents act similarly (declining an already accepted invitation "because some unexpected guests are arriving," when the child knows that no guests are arriving), the parent would disapprove of this behavior. In the first instance, the child is imitating valued behavior and is learning values of love and caring in relationships. In the second instance, the child is imitating nonvalued behaviors and is learning values of dishonesty in relationships: that it is okay to lie to get out of an unpleasant situation.

Thus, children learn a great deal about how to function in this world from their parents. Sometimes it is through direct encouragement and teaching children to imitate approved, desired behaviors. More frequently it is through indirect example and action. The concern here is that children also imitate some of the parents nonvalued but often exhibited behaviors. Gordon, in his book Parent Effectiveness Training[5] wrote:

> Parents, like many other adults with whom children will come into contact, will be models for them. Parents are continuously modeling for their offspring--demonstrating by their actions, even louder than by their words, what they value or believe. Parents can teach their values by actually living them. If they want their children to value honesty, parents must daily demonstrate their own honesty. If they want their children to value generosity, they must behave generously.... "Do as I say, not as I do" is not an effective approach in teaching kids their parents' values. "Do as I do," however, may have a high probability

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[6] Gordon, T. Parent Effectiveness Training. New York: Wyden, 1970.

> of modifying or influencing a child.... Parents teach children values by living their own lives accordingly, not by pressuring kids to live by certain rules (pp. 273-274).

Take a minute or two to think about how you would like your child, if you have one, to "turn out." Other parents have mentioned these words to describe how they would like their child to be as a teenager or later as an adult: to be concerned for others, loving, responsible, stable, independent, courageous, able to make decisions, happy, reliable, giving. With respect to drug use, specifically, many parents have said that they would like to see their child learn caution and moderation. No doubt you can think of other behaviors and values to add to the list. Graziano (1971), a child psychologist, has written that modeling "suggests that before a great child can become a great adult, he/she has to know a great adult."

Parents must consider and examine their own lives. What behaviors--verbal as well as physical--will foster the learning of their valued qualities and actions? Are there behaviors that may not promote that learning? or indeed, which may be teaching--and modeling--behaviors and qualities which they do not want to encourage? It is important to remember too, that when a child has a dilemma or a choice in a situation, the child is most likely to act the way she or he thinks an important model in her or his life would act. So, it is important for parents to teach what they value by being a model who practices her or his values.

Another important principle stems from research in learning and development: modeled behaviors are learned most effectively and more frequently if the model is warm and nurturant. That suggests that modeling as an effective parenting skill must be used along with the other communication and parenting skills. Consistent good listening and "I-Messages," particularly, lead to relationships which are warm, open, genuine, and caring. Effective problem-solving in the family further substantiates the child's perceptions of her or his parents as loving, nurturant people.

This is not to say that modeling or imitating will not ever occur if a model is cold, distant, or is perceived as rejecting. However, under those conditions, the child becomes threatened and seeks to defend from emotional harm by modeling the behaviors which threaten her or him. In this way, many nonvalued behaviors are learned. Gordon (1970) cites this example:

> "Parents who want children to value nonviolence in human relations, will seem like hypocrites when they use physical punishment to "discipline." I recall a poignant cartoon depicting a father paddling his son over his knee, shouting "I hope this teaches you not to go around hitting your baby brother!"

This child is most likely to learn to strike back or hit when angry and hurt. If a child observes his angry parent reaching for a drink during or after an argument, he is likely to imitate that kind of behavior and to learn the attitude that using a drug as a crutch is okay. Children observe, think about, and imitate the important adults in their lives: modeling, directly or indirectly, is a potent teaching device.

Direct Teaching

A less potent but very important parenting skill is the skill of *sharing* of ideas, knowledge, and experience rather than imposing or preaching ideas and knowledge. *"Do as I do, not as I say" is the general guide.* But what is said can also be very important, depending on *how* it is said. Teaching directly about their personal drug behaviors and reasons for them is important for parents to do, but will not be effective if lectured or preached. Sharing of ideas, acting like a consultant, is another approach to teaching what one feels to be "right and wrong." The concern that many parents feel is that their child may not adopt or buy their ideas and values. As most educators recognize, this is true--the student may not buy some or even all of the shared ideas. But the student is more likely to do so if the ideas and values are suggested rather than demanded, offered as one person's opinion rather than as universal truth, tendered once or twice but not pushed week after week: lecturing, cajoling, shaming, threatening are ineffective interpersonal strategies. Scare tactics and hard sell approaches do not work in any area of emotions and behavior: nationally, drug educators have discovered this painfully and belatedly. Indirect approaches, such as working towards satisfying and effective relationship skills, exploring ideas and values, helping families to listen to each member have been seen to be far more influential in enhancing healthy development and decreasing the likelihood of destructive behaviors. Direct teaching is an additional parenting skill which should be used in conjunction with good listening and effective sharing messages.

Direct teaching involves clear, accurate statements about a particular drug being used or considered. The goal is to educate the child in the characteristics of the drug, its possible uses, its positive and negative effects, and reasons for use. It is particularly important for parents to state their reasons for using the drug--or not using it--in calm, personal ways. Examples of direct teaching by parents are:

- "I only take aspirin when I have a fever or a bad headache, not every time I have a little ache or pain. I have a very bad headache now, so I will take two aspirin."
- "Beer has alcohol in it and alcohol makes your body feel relaxed and lazy, so I only drink beer when I have nothing important to do and have time to enjoy myself. I never drink when I have to work."
- "I don't want to drink too much liquor because too much alcohol at one time is very bad for my body. Also, I can't make good judgments when I have a lot of liquor in my body, and I may do or say things I wouldn't do otherwise. So, I just have a beer now and then, or sometimes a drink of Scotch. That's enough for me."
- "I just smoke once in a while, once every three days or so, because smoking can become habit forming. It's addicting. That means if I smoke too many, my body and my mind would begin to crave cigarettes and I couldn't do without them. I don't want to get into the habit, so I only smoke once every few days. Sometimes teenagers start smoking because they think their friends will see that they are really with it or because they want their friends to like them. So they smoke more and more and soon they feel like they can't stop smoking. It's difficult to stop once you've started; (you can stop but it's hard.)"
- "I don't smoke marijuana because I think it may be dangerous for my body. Some scientists think that marijuana is not harmful, but no one really knows

yet, so I'm going to be cautious and careful and not smoke it."

Teachable Moment

A related principle is that of the *teachable moment*. Direct teaching will be most effective as natural or opportune moments arise when the child herself or himself has raised the issue or is taking medication--or is watching the parent use a drug or have a party where alcohol and other drugs may be used. Parents can easily capitalize upon the teachable moment as a natural and perfect time to directly teach the child about some aspect of drugs or alcohol. The parent therefore will follow these guidelines:

1. Seek teachable moments.
2. Clearly communicate personal opinions, concerns, and worries to the child.
3. Provide, or seek out with the child, accurate information through books, films, TV, etc.
4. Keep the conversation an exchange of ideas and views.

But . . . . .

Part of positive development is the ability to think for oneself, to act independently, to be willing to take some risks: this implies that children will sometimes not agree with their parents values or may even correctly see that some of those values may lead to results which are non-valued. We suggest that sharing of ideas, modeling valued behaviors (both deliberately and naturally), responding empathically and owning feelings and beliefs are likely to foster the family climate and positive development which the parents choose to promote. We do not suggest that children will therefore become all that the parents desire or value - but the probabilities are greatly increased that most of their values will be reflected or even improved upon by their children.

Use Communication Skills Too

Another aspect of teaching children how to be responsible drug users is to attend to their emotional needs and development. This is what much of the course has been about. Research has shown that many people who become dependent on different kinds of drugs (whether it's alcohol, tranquilizers, heroin, or other drugs) are emotionally less "together" than people who are not dependent. Many, though not all, drug dependent people tend to have negative views of themselves (poor self-concepts) and some are overly dependent on others for approval (peer pressure from friends). The overriding goal of this course has been to begin to educate parents in useful skills for promoting better understanding and for providing the emotional support children need to develop into healthy, reasonably self-assured teenagers. Parents should seek out opportunities to get into conversations with their children about drug use and drugs of various kinds. They must *listen* carefully to what they have to say, to their opinions and their knowledge. They must let their children know what their position is and the reasons for it.

It must be remembered that responsible drug behavior is not taught via one or two incidents. It is communicated to the child in many ways over a long period of time. The drug scene today is very different from what it was when parents were growing up. There are a greater variety of drugs available and they are easier to obtain. The child today is faced with many more options and opportunities to use drugs. This is why it is so very important to equip ourselves and our children with the necessary knowledge and personal self-confidence to wisely decide how and when to use drugs.

SESSION 7

TEACHING YOUR CHILD ABOUT DRUGS AND ALCOHOL

I. INTRODUCTION

This session is designed to help parents to begin thinking about their own drug use values, how they influence their child's drug learning and how to take a more active role in the drug education of their children. In order to think about and discuss these issues, parents need to examine and be able to state their own values. For some parents, this will be the first time they have given serious thought to their values and beliefs about drugs. The leader should be a facilitator of this process, rather than one who defines or imposes values and opinions.

The concept of modeling should also be stressed. It is a simple concept that most parents easily understand. The important thing is to help the parents to look at their own behavior in light of the modeling principles. This is a time for parents to see the relationship between their behavior and the child's. "Do as I say, not as I do" is a good discussion starter.

II. GOALS

A. To help parents become aware of their important role in actively teaching their children how to use drugs wisely.

B. To sensitize parents to the fact that drugs are an integral part of our society and to be concerned with the use of alcohol, tobacco, and prescription drugs as well as with the use of illicit drugs.

C. To make parents aware of how much children learn and adapt in their behavior through observation of the parents' behavior.

D. To give parents actual practice in teaching about drug use through role play.

III. BEHAVIORAL OBJECTIVES

A. Parents will identify diverse situations in our society in which drugs of various kinds play a role; further, they will be able to identify the messages such situations hold for children as well as for adults.

B. Parents will recognize their modeling influences on their children, particularly in relation to expression of feelings, coping with feelings, and using drugs.

C. Parents will be able to identify teachable moments.

D. Parents will be able to suggest direct teaching responses to drug and alcohol practice situations.

IV. KEY CONCEPTS

A. Modeling. The demonstration, both intentionally and unintentionally, through action and speech of desired and nondesired behaviors. Parents teach their children many behaviors and values through their own behavior.

B. Direct Teaching. Providing accurate information and encouraging further learning about drugs, including alcohol, tobacco, prescribed drugs, as well as illicit drugs. Direct teaching means giving the child the information she or he wants to have and encouraging further learning; it also means facilitating an ongoing dialogue with the child about her or his feelings, opinions, and worries.

C. Teachable Moment. An ideal or natural opportunity to engage indirect teaching skills and/or to openly discuss feelings and values in the context of drug use. Most opportune are those times in which the child voluntarily requests information or gives nonverbal cues of curiosity. Other good teachable moments are situations in which the parent is using or has decided not to use drug(s) in the child's presence or with the child's knowledge.

V. PRINCIPLES TO EMPHASIZE

A. Drugs are a part of our society and are all around us: it is the parent's *right and responsibility* to be *active* in the drug education of the child.

B. *Children need to learn guidelines with drugs* as they do with other aspects of living; *they should be included* as much as possible in the formulation of guidelines and the modifications of those guides as they mature.

C. Parents are *significant models* for their children, in all respects including drug use. Children imitate behaviors and learn attitudes about all drugs from important adults in their lives, especially parents.

D. Children *abstract* attitudes and values *from* the model's *behavior*. For example: To get out of an unpleasant social engagement, the parent lies and says that unexpected company is coming. The child overhearing this and knowing that no company is coming says to herself or himself: "It's okay to be dishonest when in a bind because my parent does it. Therefore, I can lie to get out of a tight situation."

E. Children often imitate *directly*. For example, drinking behaviors are learned through observing and imitating parents. Parents who drink are likely to have children who drink because a) it appears to be or to produce feelings of pleasure to get drunk or high, and b) because it is a symbol of adulthood to them and they want to be like those adults they look up to.

F. Parents need to provide *constructive modeling behavior* to directly influence the learning of their idea of responsible drug use behaviors and attitudes by their children.

G. Direct teaching requires providing *accurate information* and *facilitating further learning* about a particular topic.

H. Using the *natural setting* and *capitalizing* on *the teachable moment* is a useful approach to help the child learn how to use drugs wisely, if at all.

I. An *exchange* of views and beliefs is more effective than parental "scare tactics" or peer "behind-the-barn" lessons.

J. An important aspect of teaching about drugs is to *listen carefully* to the child's views.

VI. MATERIALS NEEDED

A. Leader's Manual

B. Old magazines that contain drug, tobacco and alcohol advertisements

C. Scissors (optional)

VII. LEADER PREPARATION

A. Review Homework Activities #6, "*Practice in Positive Guidance*" and review the principles of Session #6.

B. Read introduction to Unit IV and the reading in the *Parent Workbook*, "*The Parent's Role in Drug Education.*" Formulate your own questions and discussion of the main points. Become fluent in delivering and justifying the issues.

C. Review the procedures for Session #7, becoming familiar with sequence and substance. Be prepared to offer examples to illustrate your points. Prepare a time schedule for this session.

VIII. GENERAL FORMAT

A. Review Home Activities #6.

B. Concept of Modeling

  1. Role of drugs
  2. Parental influences on children's behavior

C. Concepts of Direct Teaching and Teachable Moments

  1. Rationale
  2. Practice

D. Summary and Home Activities

IX. SESSION PROCEDURE

A. Review Home Activities #6.

1. Discuss any questions or concerns that parents may have. Continue to reinforce their efforts and desires to work on these problem-solving skills. Go over specific parts of Home Activities #6 in order to get a better idea of where there may be problems or confusions.
2. Collect the assignments so you can write feedback on them.

B. Concept of Modeling

1. Role of drugs:

   Review pervasiveness of drugs in American culture. Use the Introduction to Session #7 and the parent reading as the basis of the discussion. The purpose of this discussion is twofold: first, to alert parents to the fact that drug use is a prevalent aspect of American life and second, to sensitize them to the wide variety of drugs used--and misused.

   a. Good discussion openers:
      1) Are drugs a permanent fixture of our society?
      2) Do you accept that the use of a drug to change or improve the way you feel is a common American way of life? Is this good or bad?

   b. Give the magazines to the parents. Ask them to tear or cut out all the advertisements about drugs, medicines, home remedies, alcohol and cigarettes. This can be done in small groups or as one large group. Have parents show the advertisements which they cut out and tell what they think the ad is trying to communicate.
      1) Discuss what the messages of these advertisements are. Some are:
         - everything will be fine
         - sexual attractiveness and manliness
         - status and money
         - the good life
         - excelling in sports

2) Questions for discussion.
    a) What are these ads communicating to the reader?
    b) What do they want the reader to believe?
    c) What do you think your children are learning from these ads?
    d) What might they imitate?

2. Parental influences on children behavior.
    a. Discussion: The influences of ads and drug use in television, film, and so on is one way children learn. But children learn through other ways, too. How do parents' behaviors influence their child's behaviors and attitudes?
    b. Define modeling: Include in your rationale examples of constructive modeling and destructive modeling.
        1) Constructive Modeling:

            Your child observes parents kiss and smile affectionately: child is observed to hug doll and be tender with it and with siblings.

            Child watches parent wash the car and is invited to help. Child imitates the parent's washing techniques and industriousness. (Parent approves, reinforces positively, and gives additional guidelines as well--also part of modeling).

        2) Destructive Modeling:

            Parent angrily slaps the child: the child slaps younger siblings and doll when angry or frustrated.

            Child observes parent smoking when dinner is over: child is seen to imitate smoking when playing house with friends after the pretend meal is finished.

    c. Move to a personal discussion of modeling
        1) How do you cope with your feelings: frustration, anger, a hectic day, celebration, relief: What are your children learning from you about how to express or handle their emotions?
            a) Have parents enact some recent situations and role play the child's possible responses.

        b) Assure parents that their different ways of coping are normal and common: the purpose is to examine them and understand their meaning and their *impact* on children.

    2) Do you and/or your friends drink on social occasions? What do your children learn from this?

        a) Role play a hypothetical discussion between child and parent about this.

C. Concepts of Direct Teaching and Teachable Moments

1. Rationale: In commenting on the above role play, begin to educate parents in direct teaching skills. Provide the definitions, rationale, and key principles in your discussion. Be sure to give some complete examples such as those included in the Overview to Sessions 7 and 8 (page 157).
2. Practice: Have the parents write responses to several practice situations (page 177). Encourage the group to give comments and observations.

D. Summary and Home Activities

1. Point out highlights of modeling, direct teaching, and teachable moments. It is important that parents are clear about their own values, motivations, and reasons for using drugs--or not using them--in order to be effective models and to do skillful direct teaching.
2. Assign Home Activities #7, "*Your Values and Drug Use.*" Review the instructions. The purpose of this assignment is to help parents begin the process of self-understanding about drug and alcohol use.

X. ADDITIONAL SUGGESTIONS

A. Film Rental: "Almost Everyone Does" (WOMBAT), 1971, 14 min. color, catalogue #21337, $5.90 rental.
Synopsis: How people cope with the inevitable ups and downs of daily life. Use of alcohol and drugs to relieve depression and insecurity. Asks "What other ways are there whereby people can use their feelings instead of trying to change them by using drugs?" Positive alternatives. (PSU Film Catalogue.)

1. This film, depicts how drugs are an integral part of the American culture. In addition it shows how people use drugs to help themselves feel better. The film is intended for upper elementary and junior high children but is certainly useful for parents as well. Former parent participants report that it really "brings home" the drug issues of their own lives.
2. The leader should preview the film before showing it to the class in order to facilitate its maximum use.

   Send to: Penn State Audio-Visual Services
   17 Willard Building
   University Park, Pa. 16802
   Phone (814) 865-5400
3. Discussion Questions
   a. What was the child in the film learning from his parents?
   b. What did the father communicate to his son about the use of alcohol? about his work and his general life style? What about the mother--her use of tobacco and pills? her work and life style.
   c. What are some attitudes the child is learning from the parents in the film?
   d. Research indicates that children may learn from and imitate their parents, but may not necessarily use the same drugs. How might this be a concern to a parent who drinks a great deal of coffee, smokes a half pack of cigarettes a day and perhaps takes Sominex before going to bed?
      1) What attitudes might the child learn from this parent?
      2) What products might the child use that would produce similar effects as the parent receives from her/his drug use?

B. Video-Tape Rental: "Do As I Do", 3/4" Video-Cassette, 29 min., color, (PSU) 1975 #MUCS0126, $5.00 rental.

1. This film focuses on the parent's role in prevention of alcohol abuse. Views of how children copy their parents' actions and attitudes, how drinking is promoted in the culture through advertising and other social pressures, a classroom values session, the family environment, and teaching strategies developed by the authors of CAPS are presented.

   Send to: Penn State Audio-Visual Services
   17 Willard Building
   University Park, Pa. 16802
   Phone (814) 865-5400

2. Discussion questions
   a. What are the children learning from the TV advertisements?
   b. What are your alcohol use views?
   c. Do they match your behavior?
   d. What do you want to teach your child about alcohol use?
   e. How are you teaching them?
   f. Think of some examples of teachable moments in your own home.

XI. RESOURCES

A. You, Your Child and Drugs. By the staff of The Child Study Association of America. New York: The Child Study Press, 1971. (About $1.50)

Address: Child Study Association of America
9 East 89th Street
New York, New York 10028
Phone (212) 889-3450

Drug and Alcohol Practice Situations

1. There is a bottle of Compoz in the medicine cabinet and your child asks: "What is that?" How come you have them?"

2. You are brewing a cup of coffee for yourself and your child wants to know: "Why do so many people drink so much coffee all the time?"

3. Ten year old Susan asks, "When can I decide for myself about when to take my own aspirin?"

4. You are having a cigarette and your sever year old says, "Smoking is bad for your lungs. They told us that in school. You should stop smoking."

5. Your child overhears the adults in the living room telling a joke about a drunk. Everybody laughs. This is different from what you have been trying to teach your child about the seriousness of being drunk. Your child asks: "Why were they all laughing?"

6. Susan is running a 103° fever and you are giving her one adult aspirin. How might this be a teachable moment?

7. You like to have a beer or two (or three?) while watching NFL Football or a movie. You believe that this is appropriate. How can you teach this to your child. Under what conditions is it okay to be drinking beer? Your child needs to learn the guidelines.

8. Now that your child will be in 8th grade next year, you are getting more worried about what your child does or does not know about marijuana or pills. You'd like to initiate an ongoing conversation with your child about it. How will you do it? What are some of the things you want to talk about?

9. What do you say to your seven year old who wants a sip of your wine or beer? To your twelve year old who wants a glass of wine or beer?

10. Your child has just watched a TV police program (Mod Squad) and hears about an "overdose" (O.D.). He/she says, "I don't understand what an overdose is."

11. Your thirteen year old child asks you: "Why are you so worried about drugs? Don't you trust me?

12. Your teenager says to you: "I know you're afraid about drugs. But I'm old enough to make my own decisions."

13. Your seven year old says, "I have a headache so I took an aspirin." Do you want your seven year old to take medication on his own? How about your twelve year old?

14. Your sixteen year old daughter went to a party last night. This morning another parent, whose teenager was also there, called you to tell you that beer was served at the party. What is your reaction and do you want to talk it over with your daughter? What will you say?

SESSION 8

YOUR VALUES AND DRUG USE

I. INTRODUCTION

The purpose of this session is to extend the parents' understanding of Modeling and Direct Teaching at Teachable Moments by giving them extensive classroom practice and opportunity to explore and share their values about drug use. The focus of the session then is on clarifying parental values and behaviors with drugs, how they can model for preferred behaviors, and how they can facilitate the learning about drugs within the child's developmental capacities.

II. GOALS

A. To encourage parents to explore and examine their own values and opinions about drugs and drug use.

B. To sensitize parents to their own drug use since their use habits serve as a model for their children.

C. To help parents examine their own behavior and decide if they are modeling as they would like to for their children.

D. To give parents additional practice in direct teaching skills for educating and communicating their attitudes and beliefs about drugs and alcohol to their children.

III. BEHAVIORAL OBJECTIVES

A. Parents will identify and state their own drug use habits, motivations, and values.

B. Parents will discuss whether what they are modeling is consistent with what they wish their children to learn.

C. Parents will identify changes they might make in their own behaviors in order to positively model for their children and to be more congruent with their own values.

D. Parents will integrate their emerging self-understanding into Direct Teaching practice situations.

IV. KEY CONCEPTS

A. Modeling for preferred behaviors. Acting in ways that are thoughtful and deliberate examples of behaviors and attitudes which are positively valued. This means ongoing careful, sensitive consideration of actions and value decisions on the part of the parent. It also involves giving positive reinforcement, such as praise, to the child when preferred behaviors are observed.

B. Direct Teaching. Actively and openly sharing opinions, accurate knowledge and values about drug use with the child. This is a committed approach to the child's drug education which continued over a period of years. Parental viewpoints will change and the child will mature, which will necessitate a periodic review of values and guidelines.

V. PRINCIPLES TO EMPHASIZE

A. Modeling and effective Direct Teaching in Teachable Moments are dependent upon the parent *knowing and reflecting on her or his own values, beliefs and reasons for using various drugs.*

B. Parents need to be aware of and *examine their own behaviors* with drugs and the values they hold.

C. "Parents can teach their values by actually living them. If they want their children to value honesty, parents must daily demonstrate their own honesty. If they want their children to value generosity, they must behave generously." (Thomas Gordon, 1970)

D. Before a child can become a great adult, she or he has to *know a great adult* (Graziano, 1971); this is implied by research on child development and principle of learning.

E. Parents can and have a right to take an *active role* in teaching their children how to or not to use drugs and alcohol.

F. Parental views about drugs and alcohol should be expressed *openly and directly* to children. The typical "hush-hush" attitude contribute to the child's uncertainty and curiosity about drugs and alcohol.

VI. MATERIALS NEEDED

A. Leader's Manual

B. Drug and Alcohol Practice Situations (page 177)

VII. LEADER PREPARATION

A. Review Home Activities #7: complete it yourself, so as to further clarify your own thinking and values.

B. Reread the Overview materials to this Unit.

C. Review procedural steps for Session #8. Have your class plans clearly in mind. Prepare a time schedule for this sessions's activities.

VIII. GENERAL FORMAT

A. Review of Home Activities #7 and Discussion of Values

B. Modeling for Preferred Behaviors

C. Skills Practice in Direct Teaching

IX. SESSION PROCEDURE

A. Review of Home Activities #7 and Discussion of Values

1. The purpose of the Home Activities, an assigned discussion and subsequent written summary, is to encourage parents to begin thinking through and stating their values and beliefs concerning drug use. You may wish to use about an hour on this Home Activities review. Throughout the discussion, it is most important that you continue to relate their concerns to the skills and attitudinal concepts discussed during the program. Emphasize how good listening, sharing feelings, A-D-M and so on, facilitate understanding and educating their children *and* themselves. If during the course of the discussion it seems that parents do not spend sufficient time discussing their viewpoints *or* if it seems that added reflection would be helpful, have them break into pairs and discuss the same issues as involved in the home activities assignment. Be sure that the pairs are not close friends or spouses, since the purpose of this in-class exercise is to provide a new springboard for thought and a fresh outlook.
2. Discuss responses to Question #1 on values about alcohol, stimulants, and marijuana. Have a number of parents share their thoughts; clarify and summarize from time to time. Their answers may be vague: try to help them to be more personally specific and to apply their values to themselves.
3. Go on to Question #2. Discuss their use and nonuse of various drugs. Relate these patterns to the values expressed and note consistencies and incongruities. Encourage discussion of these inconsistencies or at least a discussion of whether their behaviors are indeed consistent with their values, and relate such issues to modeling.
    a. Questions for discussion:
        1) Will you be satisfied if your children follow your example?
        2) Are your expectations and wishes for your children different at different ages? At age 6? at age 12? at age 16? at age 21?

        3) Is it okay with you if your child imitates your general example of having a drink to relax? What about a marijuana "joint" to relax? Why or why not? What if it were legal? Would your views change?

    b. Role Plays: Ask parents to role play these situations in which the child confronts a parent on her or his behavior: "If you drink, I can too," or "Why do you smoke when you told me it's bad for your health?"

4. Use the role plays to lead into Question #3 concerning worries about the child which relates to using drugs. Be sure to call on a number of parents, perhaps each one, to voice at least one concern. Note similarities, and differences. Comment on relativism of values and different definitions of moderation.
5. Review Question #4. Ask several or all the class members to read their answers. Encourage them to be very specific about how and which skills they would use to help their children to deal with drug issues. Remember, the role of the leader is to facilitate the sharing of ideas and exploration of values.
6. Verbal Practice
    a. First, have two situations role-played by class members for the whole group. Discuss each. Solicit suggestions and feelings.
    b. Next, divide the class into triads. Using either a personal experience or enacting a practice situation, have a pair role play the parent and child together. Have the third member observe and comment on both. Be sure that each parent has at least one turn at actual direct teaching practice.

B. Modeling for preferred behaviors

1. Use the review of Question #4 to lead into this discussion. Stress modeling for preferred behaviors as another way of educating children. Reiterate some of the principles discussed in the last session and expand on them to make modeling for preferred behaviors a skill, not merely an idea.
2. In order to be skillful at modeling, the parent must apply anticipatory self-structuring, thinking about what anticipated

behaviors will mean to herself or himself as well as child(ren). The parent needs to consider whether her or his behavior is consistent with current values, and how they might be more consistent, and then plan for the actual situation.

3. Discuss alcohol and beer drinking. Come to a group consensus on how modeling is relevant in the use of alcohol use.

C. Skill Practice in Direct Teaching

1. Review these principles, relating them to the current discussion as another major deliberate method of educating children about drug uses over time, so long as the parent is aware of major personal values and guidelines.
2. Ask parents to write responses to the following statements:
   a. "Dad, what will happen if I drink a can of beer? Will I get sick?"
   b. "You should stop smoking. I learned in school that people who smoke might get lung cancer."
3. Discuss their responses and have them role played.

D. Summary and Home Activities

1. Review and summarize the class session. Solicit questions and discussion to clarify any issues.
2. Assign Home Activities #8. This is a skill practice activity as well as drug education practice. Review the instructions so that everyone understands the task.
3. Preview Session #9 activities. Ask the parents to think about the skills they feel least comfortable with. What do you want to work on next week? What will be most helpful to you? Ask them to think about what they want to work on next week and how they can best spend the last session.

UNIT V

CONCLUSION: ASSESSMENT OF GOAL ATTAINMENT

Unit V
OVERVIEW

The *building block approach* to the CAPS program reaches its culmination in this session. For teaching purposes and simplicity, each skill has been presented as a separate entity. In each succeeding week, however, parents have been encouraged to practice and use all the skills they have learned up to that point since no one skill in itself is usually enough for understanding the child or solving a problem. While "good listening" and "empathic responding" are almost always appropriate, additional skills are often needed to more completely communicate with the child.

The task of the leader is to use the Home Activities #8 and additional situations posed by parents from their own home life and conduct intensive *skill integration practice*. This is an important time for you to also provide specific, constructive feedback regarding what each parent does well and what skills seem to need more practice.

In addition to integration practice, this last session is to be regarded as an evaluation and review time, too. It is tied directly to the first session "*The Importance of Quality Family Relationships*." In that session, parents were asked to identify specific behaviors that they wished to change or improve both in themselves and in their child. Hopefully, through the learning and practice of the parenting skills presented in this program, they have been able to change those behaviors which they set as goals in Session 1. After completing the Session 9 class Worksheet they will be able to compare their responses and assessments with those goals of Session 1.

This evaluation process will create an environment in which the parent can examine her or his own progress in light of the nine week CAPS experience. They will begin to identify those areas where they wish to continue to work for more behavior changes.

As has been stated previously, each session or aspect of this program is related to and built upon those skills which preceed it. Hence, this unit is a natural tying together of all the previous sessions. It is logically two things: 1) an evaluation of one's goals which were set in the Home Activities of Session 1, and 2) a review of skills and principles in the context of discussion of what it means to be "*On Your Own*" when the course is finished. As parents bring up unresolved concerns and possible misunderstandings about the skills, the leader will capitalize upon the moment to review and encourage the practical application of parenting principles.

The concept of *feedback* is formally introduced in this session. While parents have been receiving feedback both in class and on the Home Activities assignments, the actual parent use of this skill is briefly presented in this session.

By offering parents the opportunity to share their perceptions and helpful thoughts with one another, each parent is given new pieces of information regarding her or his role as a parent. This is an important part of helping each parent evaluate her or his own progress over the last nine weeks.

In addition, the leader may encourage parents to employ "I-Messages" with their children as an effective form of feedback between parent and child. The principles of feedback, as presented in Chapter Five of this manual, may be helpful for parents as well. If time permits, the leaders may evaluate more fully upon the concept of Feedback in the context of home use with children. This evaluation should necessarily include classroom practice as well.

SESSION 9
YOU'RE ON YOUR OWN

I. INTRODUCTION

This session is designed to include four important activities: 1) Skill practice in using all skills in natural sequence. 2) A review of the concepts taught in CAPS. 3) Evaluation of goals and progress. 4) Discussion of reactions to CAPS and how to continue using the CAPS principles in one's own family when the course is completed.

Obviously, this is a great deal to pack into a two hour session. The leader can integrate the concepts of CAPS into the class discussion and skill practice activities. The length of time spent on any of the four activities should be guided by the needs and concerns of the group.

II. GOALS

A. To help parents assess their own behavior and parenting skills.

B. To help parents evaluate any changes in their children as a result of the parent's participation in the program.

C. To help parents decide what parenting skills they need further practice in.

D. To help parents understand the importance of continued practice of the skills in the home setting.

E. To provide a review of drug education principles and additional skill practice of actual drug situations.

III. BEHAVIORAL OBJECTIVES

A. Parents will complete an evaluation worksheet and discuss how this course has helped them.

B. Parents will discuss how their participation has influenced their children's behavior.

C. Parents will identify those behaviors about themselves that they wish to change or improve.

D. Parents will review the drug education principles and parenting skills through actual practice situations.

IV. KEY CONCEPTS

A. Goal Assessment. The evaluation of whether or not specific behavioral targets have been accomplished and what more may be needed to attain them. In this session, it is the evaluation of whether goals she or he decided upon in Session 1 were reached. If not, what might be done to accomplish them is addressed.

B. Goal Attainment. Achieving or accomplishing specific behavioral targets or related attitudes. In this session, it refers to achievement of goals set in Session 1 for the parent's behavior and the child's.

C. Continued Skill Practice. The ongoing and continued use of the parenting skills in the home setting.

V. PRINCIPLES TO EMPHASIZE

A. The CAPS Program is *a program of helpful concepts* and suggestions for family enhancement, not a recipe for perfect parenting.

B. *Continued deliberate use of the parenting skills at home is a necessity* for making the skills a natural part of the parent's repetoire of behaviors. Integrating the skills, knowing what to say when and how, takes time, practice, and experience.

C. Parents need to *focus on the positive behaviors* of the child as an influential means of guidance and discipline.

D. Parents need to *build on specific steps* to help themselves maintain and implement the skills and concepts of this program.

E. *Goal Setting* and *Goal Assessment* are two aspects of an important process for promoting satisfying family relationships.

F. Parents will find it useful to *continue to set goals* to work towards in their own behavior and their children's.

G. Each parent will come to a *comfortable personal parenting style* that incorporates what feels right and is facilitative in fostering family development.

VI. MATERIALS NEEDED

A. Session 8 Class Worksheet

B. Blackboard for class discussion

C. Refreshments for social time (optional)

VII. LEADER PREPARATION

A. Read and know all parent and leader material for Session 9; prepare a time schedule for the session.

B. Review all earlier session skills so that you can provide review and classroom practice in any or all of the skills as needed in integrated fashion in accord with the building block approach.

C. Prepare to review or re-explain any of the concepts presented in the course.

VIII. GENERAL FORMAT

A. Review and Discuss Home Activities #8

B. Goal Assessment

C. Extra Practice (optional)

D. Feedback

IX. SESSION PROCEDURE

A. Review and Discuss Home Activities #8

1. Solicit questions and reactions to the Home Activities tasks. You may want to ask:
    Did you find this difficult?
    What was difficult?
    How was it helpful or unhelpful to you?
2. Based on the class discussion, provide additional explanation, review and skill practice as necessary.
3. Solicit questions or comments on the drug education concepts. Stress the importance of Modeling and Direct Teaching.
4. Role-Play other situations volunteered by parents to practice skill integration. This can be done in small groups or with the entire class.

B. Goal Assessment

1. Ask parents to complete the class worksheet as a means of evaluating their progress since Session 1.
2. Go back to the Home Activities of Session 1: Compare answers with their new worksheet.
3. Discussion questions:
    a. Are your answers the same or different?
    b. Have you made progress toward your goals?
    c. What skills have you used to help you reach your goals?
    d. How can you continue to maintain the changes you have been able to make?
4. Throughout this discussion you review concepts, provide examples, and carry out skill practice (written or role-play) to meet the needs of the parents.

C. Extra Practice (Optional)

1. Ask if there are any skills or concepts that anyone would like to review. Review as necessary and reinforce their motivation.
2. Provide additional practice as is appropriate for the requested needs.

D. Feedback

1. Introduction/Rationale
   a. An important part of child rearing involves telling the child how she or he is behaving--either positively or negatively. Often this is done in a judging and critical way. Example: "You're a real slob when you eat with your fingers." Constructive feedback is important.
   b. The following short activity on Feedback will give the parents an opportunity to learn how some of the other class members perceive them as parents and as human beings. In addition, the parents will have practice in giving helpful and constructive feedback so that they can be more skillful at home.
2. Activity
   a. Form groups of 4 to 6 people.
   b. Ask each parent to tell each other group member one positive, complimentary thing about their behavior. It is best to put it in the form of an "I-Message". Example: "I like how you seem to be able to handle your child's temper tantrums. You seem to understand and accept why he has them."
   c. Also, ask each parent to give each other group member a helpful, constructive suggestion or reaction that may help the parent think about his or her behavior. Example: "I worry about the strong stand you've taken about how far Jimmy can ride his bike away from home. Most other boys his age are allowed more bike riding freedom. I wonder what the consequences are of keeping a seemingly iron-clad rule."
3. Processing
   a. Have a brief discussion with the entire group. Summarize the purpose and importance of feedback in the family.
   b. Encourage class members to continue talking after class if they want to persue issues that arose in the "feedback" exercise.

E. Conclusion

Give your own reactions to the nine week experience. Try to be personal as well as genuine in your remarks. Encourage parents to utilize the suggestion for maintenance of the skills in Reading #9, *You're On Your Own*

Solicit comments from other parents about their reactions to the program as well. Reinforce the comments about what they learned from the course and encourage them to apply the parenting skills at home.

COMMUNICATION AND PARENTING SKILLS

Parent Workbook

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Program Outline

WEEK 1 -- UNIT I - INTRODUCTION: SETTING GOALS

WEEKS 2, 3, and 4 -- UNIT II - COMMUNICATION IN THE FAMILY

A. Acceptance: The Art of Good Listening and Empathic Responding

B. "I-Messages": Your Own Feelings

WEEKS 5 and 6 -- UNIT III - PROBLEM-SOLVING IN THE FAMILY

A. Anticipatory Decision-Making

B. Problem-Solving Through Positive Guidance

WEEKS 7 and 8 -- UNIT IV - DRUG EDUCATION IN THE FAMILY

WEEK 9 -- UNIT V - CONCLUSION: ASSESSMENT OF GOAL ATTAINMENT

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PREFACE

Most parents are interested in enhancing their understanding of family relationships. Parent education has a long national and international history. Parental and professional interest in the parent's role in child and family development has stimulated the development of various approaches to "family life education." Common goals expressed by parents include improvement of family interaction, resolving problems and conflicts, and learning how to best encourage each child's development as a unique individual.

The *Communication and Parenting Skills Program* (CAPS) recognizes these goals. It is designed to teach skills which are helpful in reaching your goals as a parent. Your CAPS group leader will teach you concepts and skills in the five units covered in your *Workbook*. The units are as follows: Unit 1 -- Introduction: Setting Goals, Unit II -- Communication in the Family, Unit III -- Problem-Solving in the Family, Unit IV -- Drug Education in the Family, and Unit V -- Conclusion: Assessment of Goal Attainment. Each unit introduces several communication and parenting skills. Among the skills you will be discussing and practicing are how to listen for your child's feelings, how to convey understanding, and how to communicate your own feelings to your child. In addition, you will work on how to anticipate problems and decide upon solutions, how to use positive guidance to encourage responsibility, how to consider your own behavioral influences on your child's behavior, and how to teach your child about drugs. You already use some of these skills in your own family relationships, sometimes without realizing it. CAPS helps you to review them and to practice them in a systematic and structured way so that you may apply them more consistently and effectively with your children.

Throughout the program, you will be able to exchange ideas and experiences with the other parents in your class groups. You will be able to help each other clarify and deal with concerns. You will also be helped to assess your own behavior as a parent and to set goals which you want to work toward. You will be encouraged to evaluate your progress, to be sensitive to changes in your thinking and behavior and to set new goals as well. Most of all, you will be encouraged to practice the skills and to integrate them into your own style of parenting.

This *Workbook* will help you to organize your practice at home and will provide background reading. It is intended to be used only in conjunction with an ongoing skills training group led by an experienced skills trainer.

Skills training in communication and parenting has been helpful to many parents. Comments following training indicate that many parents experience positive changes in their relationships with their children, even when relationships were already good. Parents say that they find increased openness in relationships, greater awareness and concern for feelings, and greater sensitivity to problems the child is experiencing. More patience with children has also resulted, as well as reductions in unsatisfying interactions with children in everyday living. What your experiences will be depends upon you and your family, since each family is unique. Changes in patterns of relating take time. Hopefully, you too will find that the skills you learn in CAPS are relevant and personally meaningful to you.

UNIT I

INTRODUCTION: SETTING GOALS

Session I
Class Worksheet

My Relationship With My Child

This exercise is designed to help you identify some of the good, positive things and some of the not-so-good, irritating things that occur in your family's life. In class, you will concentrate on your relationship with one of your children. For starters, choose the child who is easy for you to handle. This child will be called your "target child." For your home assignment, you will be asked to think about your relationships with your other children as well.

I. List three behaviors of your child that you like and would like to see continued. Try to be as *specific* as possible.
Example: "I like it that Sue faithfully puts her dirty clothes in the hamper without my telling her."

1.

2.

3.

II. List three behaviors of your child which you dislike and would like to help change.
Example: "I don't like it that Jim argues about bedtime almost every night."

1.

2.

3.

(continued on next page)

III. List three things you feel you do well as a parent with your target child in particular.

Example: "I think I do a pretty good job of helping Bob with his homework. I'm pretty patient with him."

1.

2.

3.

IV. List three things you sometimes do as a parent which you would rather not do with that child--but have not yet found alternative behaviors.

1.

2.

3.

V. If you have other children, list three things you sometimes do which you do not particularly like. They may be the same or they may differ from number IV.

1.

2.

3.

Setting Your Goals

Parents get the most out of this course when they can identify some *specific* things that they *really would like to change*. Write down two behaviors that you would like to change in yourself as a parent. Example: "I make threats to my children and then I don't keep them. I hope to find a better way to help them behave than to threaten that they will be punished. And I don't follow through anyway."

1.

2.

Now write down one thing that you want to see changed in your child. Be specific. Example: "I'd like Jane to do the dishes without complaining about it."

1.

Your Target Child's Name ______________________________

Keep this worksheet: You will need it for Session 9.

Your Own Notes

Common Child Behaviors

Here are some common problem behaviors that may help you think about your children. Check those that you consider to be a problem with your child.

____ eating problem
____ bedtime problems
____ won't do chores
____ helplessness
____ arguing
____ physical violence
____ stealing
____ sassing
____ fighting
____ messy room
____ anger outbursts
____ bossiness
____ poor school marks
____ lying
____ dawdling
____ swearing
____ inconsiderateness
____ shyness

Common Parent Behaviors

Some parent behaviors to help you think about yourself.

talking, lecturing
showing disappointment
taking away privileges
getting angry
giving orders
ridiculing
scolding
shouting
name calling
shaming
interrogating
criticizing
yelling at
complaining
put downs
threats
using sarcasm
spanking
blaming
withdrawing
nagging
jumping to conclusions

Home Activity #1 Name ______________________

YOUR PARENTING RELATIONSHIPS

Note: Keep this assignment: You will need it for Session 9.

Directions:

This exercise is intended to encourage further examination of your parenting relationships, as begun in class. You have spent some time in class discussing concerns and difficulties in raising a family and in being an effective parent. Now take time to more closely look at your relationships with all your children, to pinpoint the similarities and differences and the strengths and weaknesses. You are asked to find the pattern in your relationships, and to consider which enhancement goals you wish to pursue. Use the back of the paper if you have more than three children. If you have only one child, try to think of more behaviors that you like and dislike about your child and yourself.

Again, be sure to *specify particular behaviors* rather than make broad generalizations.

I. List three behaviors of each of your children, excepting your target child, which you like and would like to see continued.

Child 1: Name ________________	Child 2: Name __________________
1.	1.
2.	2.
3.	3.

II. List three behaviors of each child which you dislike and would like to change.

Child 1:	Child 2
1.	1.

(continued on next page)

2.	2.
3.	3.

III. List three things you feel you do well as a parent with each child. They may be the same or they may differ.

Example: "I wish I wouldn't nag so much at my child - it seems like I am always after her to do something."

Child 1	Child 2
1.	1.
2.	2.
3.	3.

IV. Now go back to the worksheet you did in class. Review the goals you have set for yourself. Are you still satisfied with them? If not, change them to more accurately reflect your thinking.

UNIT II

COMMUNICATION IN THE FAMILY

Reading for Sessions 2 and 3

ACCEPTANCE: THE ART OF GOOD LISTENING AND EMPATHIC RESPONDING

Perhaps the most difficult aspect of communicating is *knowing how to listen*. Most of us tend to think ahead to our response. We tend to formulate our opinion and find words for our own feelings rather than to *pause* and thoughtfully listen to what the other person is saying. This is most clearly seen in instances where a friend or child tells us of a problem and our immediate, well-intentioned reply is chocked full of advice and solutions.

Charles Shultz captured this perfectly in a "Peanuts" cartoon some time ago. His drawings depicted two girls walking along and talking. One says, "*I'm still trying, but I'm doing lousy in school.*" Her friend replies, "*Maybe you need to eat a better breakfast or have your eyes checked or start going to bed earlier...*" In exasperation and disappointment, the first one cries, "*You've never understood, have you, that when a person complains, she doesn't want a solution, she wants sympathy!*"

Listen First

Being a good listener means actively sympathizing and empathizing with the other person. Being a good listening parent means *pausing in your own reactions* and *putting them aside for the time being* while sincerely trying to experience the child's feelings and point of view. Listening in an active way involves deliberately focusing on the child's messages.

A good listener would have responded differently to the little girl's disclosure that she was doing lousy at school. Depending on her facial expression and voice tone, which can indicate different emotions, an attentive listener might have said, "*You're really frustrated about your schoolwork*" or "*Seems like as hard as you try, you still feel discouraged.*" The focus, for the moment, is on the *other person*--tuning in to what the girl is feeling, listening for what her message really is.

By focusing on the other person instead of your own point of view, good listening provides the foundation for the sharing and exchange of ideas and feelings. It is the basis of truly satisfying communication: it tells the other person that you empathize with and respect her or his feelings and viewpoint *and* it encourages the same from her or him. When people feel that they will be heard and understood, they are more likely to reciprocate by being an attentive listener. Children in this way can learn to be sensitive to the parent's feelings and views.

Children are generally eager to talk with their parents about their thoughts, feelings, and activities. They also like to rehash previous experiences so as to better understand them. Like adults, children are trying to make sense of themselves and the world around them, and they do a great deal of thinking about their experiences. Parents do not always understand this. Even when they do understand, they sometimes find it difficult to follow the child's train of thought. Therefore, they often fail to take the time to listen *empathically:* And *it does take a lot of time* to help the child sort out and understand her or his many feelings and impressions of the world.

Helping a child to do this is *constructive teaching*. But many parents feel that to teach mainly means correcting a child's behavior or way of expressing feelings. Doing so, they act more as guardians of the socially expected and less as educators. It is true that *parents are teachers* and must educate their children, but *good listening* rather than lecturing or moralizing to correct behaviors *will better promote the learning* the parent is trying to encourage in the first place.

Understanding is the basis for developing socially and personally acceptable behavior; self-understanding first develops from within. The better a child understands her- or himself, the better the child will understand other people's needs, concerns, and values and the better she or he will be able to respond. The parent who is skillful at and genuinely interested in listening to her or his child will help the child to more accurately comprehend emotions, relationships, and needs. There is always time after good listening to share your feelings about which behaviors are more appropriate than others.

Children are attuned to the messages their parents give them by both their actions and their words. Practicing good listening skills always tells the child that you are trying to understand and that you accept her or his feelings as a unique way of experiencing the situation. The listening parent tries to step into the child's shoes to feel what the child is feeling and to sense the importance of those feelings. The messages to the child are: "I *understand*," "I *care*," and "I *like you*."

In this way, good listening is the key to both developing a rich, meaningful relationship with your child and to enhancing the child's own view of self. As your child feels your respect and empathy, she or he will feel increasingly loved by and close to you and will want to show you love, respect, and trust. Simultaneously, when you let your child see that she or he is liked, respected, and valued by you, the child will grow up believing in her- or himself. Both good relationships and positive self images are important in reducing the likelihood of drug dependency and other problem-based life patterns.

Guidelines for Good Listening

It takes time and practice to develop good listening skills. At first, being an attentive, empathic listener feels artificial. It may even seem stifling--there is so much you want to say. *One of the main principles to learn is that you must exercise patience to be a good listener.* Deliberately and patiently listen to all the child has to say. Before you reply with your own attitudes and feelings, allow the child to explore her or his feelings. Good listening is complete listening.

If you feel that you cannot listen at that moment, say so and arrange mutually for another time. Parents who are candid about their own feelings teach their children to be honest, even in the harder situations. Saying "*You're really excited about something and want to tell me, but I'm really feeling rushed now--is it okay with you if we talk in five minutes after I get dinner in the oven?*" is quite a different message from "*Can't you ever keep quiet for two minutes--you can see I'm busy.*" In the first instance, the parent conveys interest in the child and a willingness to make special time. In the second situation, the focus is on the parent's needs only. It even suggests that the child is somehow at fault for the parent's dilemma. So, the guideline is to be willing to listen or arrange for a time when you can listen attentively.

A second principle to keep in mind is that *when you are listening, concentrate on the child's words, tone of voice, facial expression, and gestures.* Be on the alert for when your child does express particular feelings--complaining, exclaiming happily, pouting, tears, big smiles, confused eyes, questioning brows, proud posture, and so on. Your child may or may not use words to express feelings. Don't always rely on words. Children's faces often reveal what they are unable to put into words. Good listening is attentive listening, actively *trying to feel the feelings of the other.* Stay in touch with the child's ideas. Think in the child's words. Try to use your child's concepts to guide your understanding of the messages she or he is actually giving you. Focusing on the unspoken signals as well as the words will help you to view the world through your child's eyes at the moment.

Related to this is a third principle of good listening: *listening for the "message behind the message" of what your child is saying.* Often children will say something that on the surface seems insignificant. On closer listening--empathic listening--the parent will understand the larger issue that is of concern to the child. Sometimes this is called "listening with the third ear." Your "third ear" can pick up on subtle meanings and important feelings that surface listening simply misses.

The following example demonstrates this: Not infrequently in these days of price spirals younger children are given "hand-me-downs" from older brothers and sisters. Six year old John regularly gets clothes from his older brother, Jeff. Just recently, Jeff became interested in baseball and needed a mitt to play on the Little League team. His parents, wishing to encourage Jeff's new involvement with friends through team sports, decided to buy him the mitt and a baseball hat as well. John became upset and complained, "*Why do I always have to wear the old clothes. You buy Jeff new things when he wants them. I never get anything new!*" A surface listener might respond, *Sure you do--why, I bought you a new pair of shoes just last month.*" The alert listener will pick up the real "message behind the message," which is that John feels left out, second best, and valued less than Jeff because Jeff gets the new things most frequently: "*Sounds like you feel left out when I buy Jeff something new.*"

Good listening permits the parent to sensitively perceive and respond to the main issues. The parent in the situation above need not feel guilty that both children were not treated exactly the same way: each child has individual needs and the parent has to meet certain needs of her or his own. The point is that equal treatment is not the issue, nor is buying all new things for Jeff the issue: the important concerns are John's feelings about being the younger child. Identifying those feelings and exploring them with John will enrich both the parent's and child's understanding of themselves as people. Doing so will also allow them to arrive at some agreement about hand-me-downs. Letting John know that his feelings about being the younger one are understood will go a long way in helping him to accept his role in the family. In addition, the parent will be attuned to finding other ways to let John know that he is just as special as Jeff.

Door Openers

Once you sense that something is going on with your child, you will want to give some indications that you are ready to listen. There are many ways that you can show you want to listen--these are known as *door-openers*. Your behavior paves the way for the child to discuss the experience or problem with you. Below are some examples:

1. A smile.
2. A motion to sit down by you.
3. A hand on the shoulder or a hug.
4. An invitation: "*You look like something is bothering you. Want to talk?*"
5. A concerned look and gesture.

After you have concentrated on listening and worked hard to "put yourself into your child's shoes," and have identified what you think the child is feeling, you have enough information to *communicate back to the child that you do understand what she or he has said or is communicating through unspoken cues to you*. That is, you are then ready to give an empathic "good listening response" to your child. Your class leader will give you training in developing your good listening responses.

Empathic good listening conveys acceptance of feelings. It does not necessarily imply acceptance of your child's behaviors. You may disagree with or not personally feel what your child feels in given situations, and you have those rights. However, it is most important to recognize and accept that every individual, young or old, has their own feelings and ways of thinking and has the right to express them. A good listening parent will go further by helping the child to identify her or his own feelings and express them. Such attentiveness, concern, and acceptance will engender open and honest relationships between parents and their children.

Then Respond: Empathic Responding

Communicating with your child is a two step process. First, you must be a good listener. Secondly, you will want to be an empathic responder. That is, you then talk with your child in such a way that conveys that you do indeed understand your child's feelings. Identifying the feelings for your child and letting her or him know that you understand the message is the basis for trust and openness between parent and child.

For example, when 10 year old Susan complains of a stomach ache and sweaty hands on the day that she must have a tooth filled, she needs understanding rather than judgments or put-offs. *"Sounds like you're really worried about your visit to the dentist today. Yes, it might hurt a little but I hope you can be brave,"* is an empathic response that tells the child that the parent does understand the anxieties of a visit to the dentist. Simply saying *"Be brave"* is not enough because it does not convey any empathy for what Susan is experiencing.

Below are some typical parent responses that would not be helpful or reassuring to the child:

Child: *"Do I have to go to the dentist? My stomach hurts and anyway my cavity is just a tiny one. Let's go some other time."*

Lecturing:	"It's necessary for all of us to go to the dentist for check-ups and fillings. Taking care of your teeth is an important part of living."
Accusing, Shaming:	"Well, if you'd brush your teeth more often, you wouldn't have to go to the dentist."
Threatening:	"If we don't go, your tooth will have to be pulled and that will really hurt."
Ridiculing:	"You really are a baby!"
Stereotyping:	"Everybody has to go to the dentist now and then."
Advice Giving:	"Try to think about something else, then it won't seem as bad."
Clichés:	"Nobody promised you a rose garden."
Empathic Responding:	"Sounds like you're concerned with what's going to happen at the dentist. You're worried that it might hurt a little."

Empathic responding, on the other hand, is approaching your child in a positive, constructive manner. Our typical way of dealing with children and adults is to try to make them feel better or to change by saying things that actually have the effect of making them feel worse. You have just read several *typical responses* whose impact is to make the child feel worse through guilt, shame, and so on. Parents get a good deal more mileage out of a more positive approach--as an enhancer of self-worth and genuine caring. Children who are secure in their parent's love and in their own self-esteem are much less likely to pose serious behavior problems later on.

Here are some ways in which you, as a parent, can be positive in your approach to life with your child:

Non-Verbal Expressions that say, "*I'm with you.*"

- Smile
- Winking
- Pat on the shoulder
- Nodding head
- Eye contact
- Sitting on lap
- Hugging
- Holding hands

Words that communicate interest and concern

- "Good."
- "Very clever."
- "Thank you."
- "Great!"
- "I agree."
- "Go to it!"
- "Good job."
- "I'm proud of you."
- "Tell me more."
- "Excellent!"
- "I'm with you."
- "Groovy!"

Door Openers

- "Oh, really."
- "Tell me about it."
- "Looks like you've got something to say."
- "You look sad."
- "Want to talk it over?"
- "Need to talk?"
- "I'd like to hear your side."
- "Shoot, I'm listening."

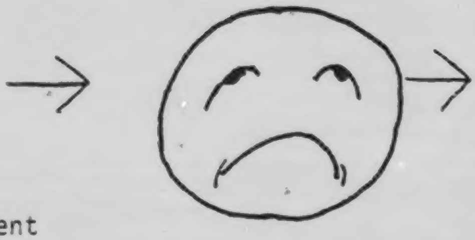
Full Empathic Responses (and Conversations)

(Parent) "*It really upsets you when the kids say you're too young to play.*" (Child: "Yeah, I don't like it.") (Parent) "*Your feelings are hurt.*" (Child: "And I feel left out, too! What can I do?") (Parent) "*You'd like to think of ways you'd be more a part of the group. How do you think you might act?*"

Complete empathic responses involve not only identifying and labeling the feeling or feelings behind the words and actions, but also voicing *the context* for them. With your understanding of the principles of good listening and empathic responding and with practice in class and at home, you will be able to use and become comfortable with both skills. You will find that you understand your child more fully. You will also find that your child will feel better understood and more interested in talking with you.

Your Own Notes

DEVELOPMENT OF THE CHILD'S SELF CONCEPT



Cues from "Significant Others"	Child Behaviors
ridicule	aggression
sarcasm	indifference
annoyance	failure
rejection	withdrawal
anger	tension
distrust	hostility
discouragement	fear
impatience	guilt
	submissiveness

SENSE OF FAILURE
Negative Self-Concept

Cues from "Significant Others"	Child Behaviors
acceptance	success
concern	creativity
encouragement	achievement
security	belonging
empathy	interest
sensitivity	identification
understanding	cooperation
	curiosity

SENSE OF PERSONAL WORTH
Positive Self-Concept

Home Activity #2 Name ____________________

GOOD LISTENING

I. Directions: The task here is to work on increasing the number of feeling words that you use in order to very *accurately* identify your own and your child's feelings. Below are several feeling words which are somewhat general or broad. Try to think of one or two more feeling words that would have slightly different "shades" of meaning for the same word.

Examples:

upset - annoyed, ticked-off, left out, disregarded, frustrated
happy - joy, exhilarated, high, excited

angry - ____________________, ____________________, ____________________

stupid - ____________________, ____________________, ____________________

lonely - ____________________, ____________________, ____________________

excited - ____________________, ____________________, ____________________

discouraging - ____________________, ____________________, ____________________

resentful - ____________________, ____________________, ____________________

proud - ____________________, ____________________, ____________________

mean - ____________________, ____________________, ____________________

glad - ____________________, ____________________, ____________________

edgy - ____________________, ____________________, ____________________

elated - ____________________, ____________________, ____________________

leftout - ____________________, ____________________, ____________________

(continued on next page)

II. Directions: Children often communicate to parents much more than words or ideas. Behind the words often lie feelings. Here are several typical "*messages*" children send. Read each one separately, trying to pick out the feeling behind the message. Write down the feelings that you think best describe how the child is feeling. Then try your hand at writing a brief empathic response--a short feeling response. We will go over these in the next class.

(1) *"There's nothing to do. All the other kids are playing basketball, and they say I'm too young to play."*

Feeling:

Short Feeling Response: "You feel ______________________________

____

____

(2) *"I hate Judy next door. She says I don't play hopscotch the right way and that I can't play anymore."*

Feeling:

Short Feeling Response: "You feel ______________________________

____

____

(3) *"Hey, look at this airplane I built out of popsicle sticks and glue. It even flies."*

Feeling:

Short Feeling Response: "You feel ______________________________

____

____

(continued on next page)

(4) *"Can't I take this stuff down to the basement tomorrow morning? I heard funny noises down there."*

Feeling:

Short Feeling Response: "You feel ______________________________
____
____

(5) *"Our Girl Scout meeting was really neat today! Our leader is going to take us on a campout next week. She's really nice!*

Feeling:

Short Feeling Response: "You feel ______________________________
____
____

(6) *"On the TV show Mod Squad they showed a man who would rob houses and then sell the stuff to get money to buy drugs. Are there people like that in our town?"*

Feeling:

Short Feeling Response: "You feel ______________________________
____
____

(7) *"I heard some high school kids at the bus stop talking about what kinds of beer they like best. When I get older I want to drink beer with my friends, too."*

Feeling:

Short Feeling Response: "You feel ______________________________
____
____

Home Activity #3 Name ______________________

EMPATHIC RESPONDING

I. Directions: Below are several *messages* that children often send. Read each statement carefully and write an appropriate complete empathic response.

Example: *"Sally always gets the new clothes and I have to wear her old, junky hand-me-downs.*

Empathic Response: "You feel bad because you have to wear second-hand clothes."

or

"You wish you could have some new clothes, too."

1. *"Bill took my bike to the playground again without asking me!"*

   Feeling:

   Empathic Response:

2. Eleven year old Mary said,
   "I don't need a babysitter. I can take care of myself. Sally gets to stay by herself and she's six months younger than I am!"

   Feeling:

   Empathic Response:

(continued on next page)

3. *"The teacher always picks on me and she never smiles. I try to do the right thing and she still is mean."*

   Feeling:

   Empathic Response:

4. *"We had a test in social studies and I got all the answers right!"*

   Feeling:

   Empathic Response:

5. You've asked your daughter to rake the leaves in the back yard. She goes outside, gets the rake but you see that she's procrastinating. You let it go for another twenty minutes, then you go out and say to her:

   Feeling:

   Empathic Response:

6. *"When can you fix the flat tire on my bike? It's been more than three weeks since it went flat."*

   Feeling:

   Empathic Response:

(continued on next page)

II. Now think of two recent incidents in which your child exhibited feelings which were not *specifically* identified. First, write down what your child said. Then, think of an appropriate *empathic response* which you could say to your child should the situation occur again.

Example:

Child: Scott's friends are outside, waiting for him to come out to play. He must do his math before he can play. *"I can't do these problems. There are too many to do!"*

Parent: *"You're worried that the problems will take too long to do."*

or

"You're concerned that you won't get done in time to play with your friends."

1. Child:

Parent:

2. Child:

Parent:

Reading for Session 4

GIVING "I-MESSAGES": YOUR OWN FEELINGS

You have spent a good deal of time learning about and practicing the skills of good listening and empathic responding. As you have probably discovered, listening and responding to your child's feelings takes genuine effort and hard work from you but is well worth the effort. Communicating to your child that she or he is acceptable and that you highly value her or him as an important human being can be rewarding for both of you.

Empathic Responding is appropriate in almost all interactions, verbal or nonverbal, between you and your child. You can be a good listener and respond empathically when your child tells you positive things as well as when she or he has a problem and needs your understanding and acceptance.

But there is more to promoting healthy parent-child relationships than being a good listening parent. Communication is a two-way process. It involves *responding* to the needs and feelings of parents as well. Parents have feelings and problems just as children do and they have a right to express them to other family members. While most children will not be able to listen and respond as well as the parent, they can be taught to be sensitive and respectful of the parent's needs and problems. This sensitivity is taught to the child in two major ways:

1) The parent is a *model* for the child. This means that the parent demonstrates or models sensitivity by being respectful and responsive to the child's needs and feelings, and
2) the parent communicates her or his own feelings with an "*I-Message*." That is, the parent is *honest and specific about her or his feelings* in a constructive manner that doesn't attack or judge the child.

An "I-Message" is a statement of the parent's feeling(s). Often, it communicates the parent's feeling about some behavior of the child. For example, you might be driving downtown with your two children in the back seat who are becoming louder and more rambunctious. You find that the noise level coupled with the tension of driving is too much for you. You need to have the children quiet down. Your "I-Message" would be: "*Boys, I'm afraid I'll have an accident. I get very tense when you shout and laugh loudly in the car and I need more quiet in order to drive.*" Here the mother has stated her feelings and concerns. Laughing and talking loudly in itself is probably not harmful, but in the context of being in the car in heavy traffic, this mother has a problem that needs to be resolved. In this instance, her boys have not been personally attacked or blamed. She has simply told them how she feels about the situation. In this example from a real life situation, the boys did calm down and talk quietly for the remainder of the ride.

Parents have the right and the obligation to express their feelings to their children. An important part of raising children is helping them learn to understand and respect the feelings of others too. They cannot learn to develop respect and sensivity to the feelings of others unless their parents help them to understand the feelings of those closest to them. The place to start is with "I-Messages."

An "I-Message" is to be used when you, the parent, have a *problem*--that is, when something that the child is doing is annoying or interfering with you in some way. Of course, "I-Messages" are to be used in *positive* situations, too--when you are glad for what your child is doing or when you experience some positive feelings that you want your child to know about. "*I'm glad you practiced your horn without my having to remind you.*" Giving an "I-Message" is "*owning*" or acknowledging your own feelings and expressing them in a constructive way.

Here are some examples of how an "I-Message" is so much less accusatory than some of the usual ways that parents often respond. Notice how *specific* and *directed* these feeling messages are when in "I-Message" form.

Usual Way	"I-Message"
"*Why can't you ever put your boots in the closet instead of in the middle of the floor. You're such a slob.*"	"*I get really tired of stumbling over your boots. The boots belong in the hall closet.*"
"*Don't be so impolite--you're always interrupting me.*"	"*I'm talking with my friend and I am upset that I can't hear her when you interrupt me. I will be able to speak with you in five minutes when I get off the phone.*"

Usual Way	"I-Message"
"Turn that stereo down--you'd think we were all deaf around here."	*"Jim, I'm having trouble concentrating on my reading when the music is so loud and I need to get this done before I go to my meeting at 8:00."*
"Stop that yelling and running."	*"I need to rest and have a quiet time. I can't do that when there is a lot of noise."*

Notice how each "I-Message" expresses *how the parent feels* about an issue but *allows* the child to take the responsibility for changing her or his behavior, e.g., turning the stereo lower, etc. In addition, the "I-Message" does not evaluate the child. Rather, it states *in specific terms* what the annoying behavior is. It gives the responsibility to the child to respond to the parent's feelings and change the annoying behavior. This is one of the goals of most parents--to raise a child who is responsive to others. This means a child who will respond to others without having to be directly told or ordered every time.

Telling your child how you feel in an "I-Message" is constructive because:

1. It does not personally attack or criticize your child. It encourages the child's positive self-concept and integrity, while at the same time it lets the child know that she or he needs to change some behavior in order to help you solve the problem.
2. It provides the child with the opportunity to take responsibility for her or his own behavior. When the parent demands constantly that the child behave in certain ways, the child is allowed no initiative in setting her or his own behavior in a responsible fashion. "I-Messages" offer the child the *one* opportunity to listen to the parent's needs and to be responsive on her or his own. Taking charge of one's own behavior is one of the most important ingredients in learning to become a responsible adult.
3. It helps the child learn to respect and understand the feelings of others. Being able to respond to someone else's problem is part of being sensitive to others.

Keep in Mind

1. "I-Messages" are for *positive expressions* as much as the negative feelings. In fact, be sure to give positive "I-Messages"; children need all the reinforcement and self-concept enhancement they can get.

   Some examples of positive "I-Messages" are:
   - a) *"I'm so glad that you made the team. I'm proud of you."*
   - b) *"I love you."*
   - c) *"Shopping with you today was a pleasure. You were so pleasant to be with and I'm glad for both of us."*
   - d) *"You boys really handled yourselves well at the party. I'm proud of you."*

2. Try to *match your words with the feelings* that you are having. Do not overstate or understate your problem--try to be clear and accurate.

   For example, when Johnny continues to pester and then hits the baby, it no doubt becomes very upsetting and angers you. To say, "*I don't like it when you hit the baby*" would not communicate how strongly you feel about the issue and how important it is for him to stop. A more accurate "I-Message" might be, "*I am very upset and get so angry when you hurt the baby. "You need to stop hitting her now.*"

3. "I-Messages" are *not the cure-all* for all of your problems. You may find, especially at first, that your child may not immediately respond. "I-Messages" will take practice and repetition to become an established part of the communication between you and your child. But when you let the child know your "own" feelings, you are not ridiculing or shaming or personally judging the child. Rather, you are communicating something about how you feel about the issue. The child can then change her or his behavior without any loss of self-respect. As this method becomes a habit, you will find it a most constructive way of dealing with your child and she or he may rarely need other explanations.

Home Activity #4 Name ______________________

GIVING "I-MESSAGES"

I. Directions: Read each Scene and Criticizing Message. Write what your feeling(s) would be if you were actually in the situation. Then write an appropriate "I-Message."

Example:

Scene - You have worked hard all day and feel physically worn out. You decide that a 30 minute catnap would help re-energize you but your child keeps asking for things and making a lot of noise.

Criticizing Message - "*Stop pestering me. Can't you leave me alone for 30 minutes? Now get out of here so I can have some peace and quiet.*"

Parent Feeling - exhaustion, frustration, annoyance, anger

"I-Message" - "*I am dead tired and cranky. I need to rest for a half hour so that I'll feel better. I can't sleep when you ask me questions and make so much noise.*"

A. Scene - Ten year old left the stove burner on, hence the possibility of a fire.

Criticizing Message - "*What do you want to do, burn down the house? Now pay attention to what you're doing!*"

Your Feelings -

"I-Message" -

B. Scene - The bicycle is in the middle of the driveway again and you've got to get out of the car and move it before you can drive in. This has been happening quite often lately.

Cricicizing Message - "*When are you going to remember to park your bike on the grass? You make me so angry!*"

(continued on next page)

Your Feelings -

"I-Message" -

C. Scene - Spring has arrived and baseball fever has hit all the 8-12 year olds. Your child is practicing by throwing the ball against the house - within a couple of feet of livingroom window.

Criticizing Message - *"You can't practice there--before you know it you will break the window and you can pay for it!"*

Your Feelings -

"I-Message" -

D. Scene - You've cleaned up the kitchen and feel satisfied that everything is washed up and neat looking for a change. Your child comes in, makes a sandwich and leaves everything lay. There's jam spilled and crumbs on the floor.

Criticizing Message - *"Hey you slob, clean up that mess!"*

Your Feelings -

"I-Message" -

(continued on next page)

E. Scene - (Here's a positive one) - You went out to a restaurant for dinner with the family. Before going you spoke with your child about proper social behavior and good manners. The dinner was great and your child handled her/himself very admirably.

Criticizing Message - *"You behaved yourself tonight so here's a dime because you were so good."*

Your Feelings -

"I-Message" -

F. Scene - One of the house rules is "Homework before TV." Your child is again watching TV even though his homework isn't completed. It seems as though you have to keep track of him all the time so that he'll do the homework.

Criticizing Message - *"You know the rule. Now do that homework right now."*

Your Feelings -

"I-Message" -

G. Scene - You need to get a tool from the garage and when you get there you find your child and a friend smoking a cigarette.

Criticizing Message - *"What's going on? You should be ashamed of yourself. Don't ever let me catch you smoking again!*

Your Feelings -

"I-Message"

(continued on next page)

II. Directions: Write an appropriate empathic response to each statement below.

A. (12 year old David) *"That dumb sister of mine - she always thinks that she can play ball with me and my friends. I wish she'd get lost."*

B. *"I don't need a babysitter. You treat me like a baby and I'm old enough to stay alone without a babysitter."*

C. *"You're always picking on me. I'm always the one who is at fault. You always blame me for everything."*

D. *"Do I have to go to the doctor? I'll feel better tomorrow."*

(continued on next page)

III. Your Own "I-Messages"

A. Now briefly describe a situation at your house in which you think an "I-Message" would be in order.

B. Write down the "I-Message" you'd like to give.

C. Try to use the "I-Message" on at least three different occasions this week. Write down the three that you tried. We will discuss these in the next class. Remember, you can give an "I-Message" to anyone--your child, spouse, friend or relative.

1.

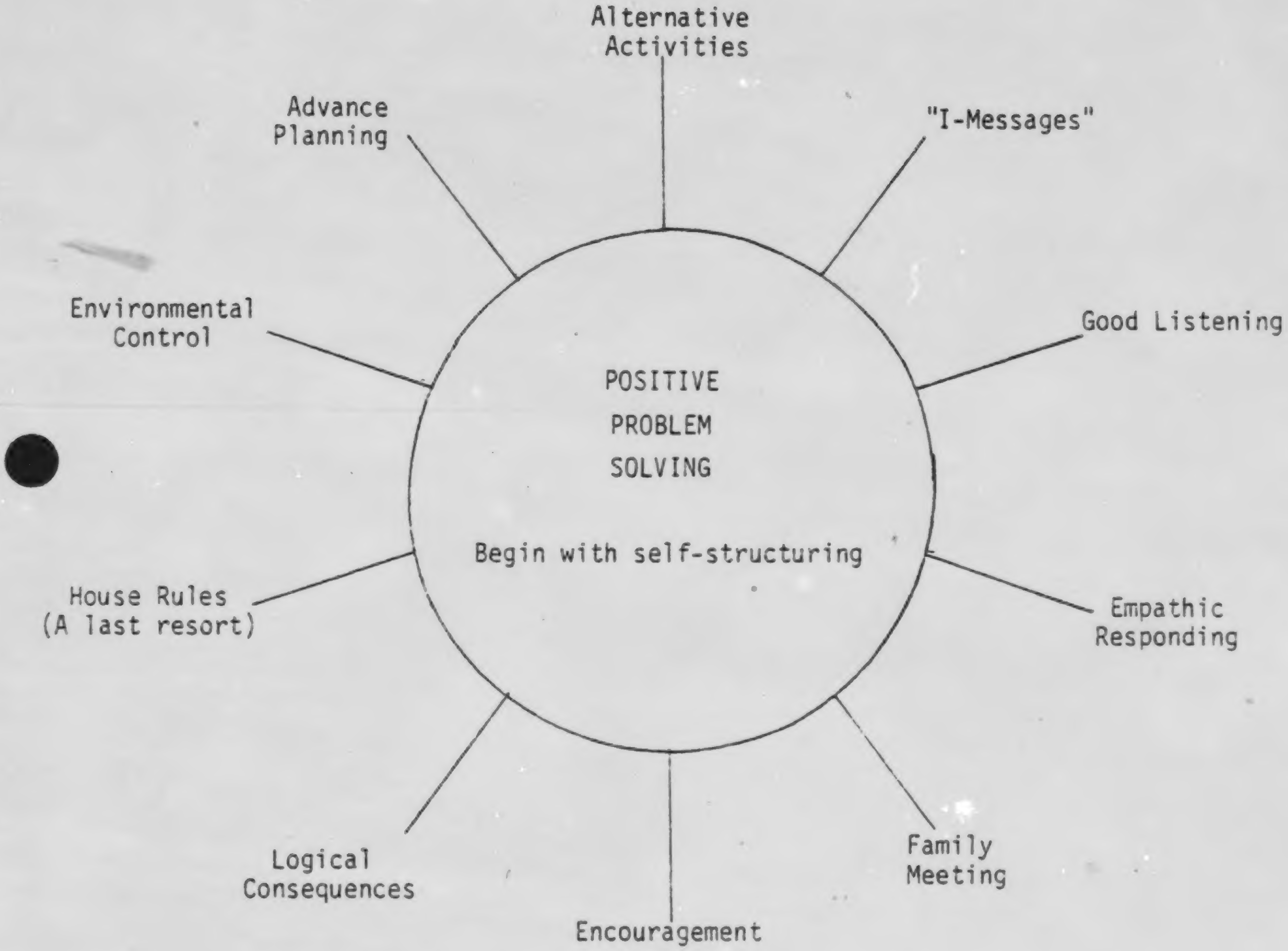
2.

3.

UNIT III
PROBLEM SOLVING IN THE FAMILY

3

TEN PROBLEM SOLVING SKILLS



One single skill is often not adequate.

Parents can use several skills in combination to solve problems.

Reading for Session 5

ANTICIPATORY DECISION-MAKING

Problems arise in all families. Someone forgets to feed the cat. The children can't agree on which TV show to watch. The result is irritation. More serious tensions are often felt when children fight together on car trips, when parents disagree on roles, or when parent and child have differing ideas on what makes for a neat room. Conflicts like these are a fact of life, but parents can develop skills that will make it less likely that entangled problems grow out of them. Learning to anticipate problem situations and to decide on solutions--even before the problem makes itself felt--is the key. This skill, called *Anticipatory Decision-Making* (A-D-M), is designed to help you analyze potential problems either by yourself or with your child in order to head off or alleviate a problem.

When you practice A-D-M, you are practicing a common sense approach to living by *planning ahead*. Many of us anticipate problems: we grumble and groan that all sorts of catastrophes are going to occur, that certain feelings are going to be aroused which we'd rather avoid, that we're certain that such and such will go wrong. With skillful Anticipatory Decision-Making, you can make positive use of your understanding of situations.

Decision-Making, as a basic approach to family living, enhances the family's understanding of each member's needs and each member's ways of experiencing the world. It encourages responsible action by all family members to meet those needs--or to find satisfactory compromises. You will find as you practice A-D-M that you will become increasingly aware of your own and your child's feelings and experiences. You will also find that you take a positive approach to family problems. Your child will no doubt begin to demonstrate more responsibility in participating in the day-to-day family life.

As you read further, you are encouraged to refer to the *Anticipatory Decision-Making Chart* on page 53. This skill comprises a rather detailed and lengthy step-by-step process that can best be understood if the Chart is used.

Some parents already use A-D-M with their children but only with very young children. For example, most parents place a gate at the top of the stairs when they have infants and they keep chemical products out of reach of toddlers. Many parents, however, miss the wide usefulness of this skill with older children. The major focus of this reading will be on how to use A-D-M with your own school-aged children as an effective method of solving or heading-off problems. In addition, some specific suggestions about how to include your child in the process will be provided.

There are three parts to Anticipatory Decision-Making (A-D-M).

1. Self-Structuring (thinking through the problem yourself)
2. Deciding what to do
3. Carrying out the plan

Keep in mind that each of these three parts have several steps which are necessary to follow in order to make an effective decision. Depending upon the problem, the situation and your particular child, you can include your child in *any or all steps* of the decision-making process. *It is recommended that the child be included as much as possible.* The more the child can take part in the family life, the more responsive and sensitive your child will be to what is going on in your family. For example, when Susie can be a part of helping to decide on when and how long she should practice the piano, she is more likely to be consistent about practicing on her own. She will also be more attuned to the need for not interfering with her brother's chosen times for practicing his band instrument.

You may also find that by reviewing past problem areas, you can altogether avoid similar problems in the future. For example, long car trips often result in boredom and, consequently, in the children pestering each other. The problem is that everyone gets bored and tired when driving for any distance. You do not wish your children to fight and tease each other, but you do wish that they would amuse each other. You'd like them to play together reasonably quiet in the back seat. You may be planning another trip in the near future. You are probably anticipating the same problems that occurred on the last trip and would very much like to avoid the "repeat performance." Here is where you can effectively use A-D-M. In this case, the problem is how to avoid potential unpleasantness that could spoil the car trip. This is also a good opportunity to include the children in deciding how to avoid the problem. Be assured that they would like a pleasant trip, too.

A-D-M is a *problems prevention strategy.* When the parent can look ahead and foresee a problem, it makes a great deal of common sense to take a positive approach to the situation. Below are some examples of how parents can enhance family life by anticipating a problem and making wise decisions about how to handle the situation in a positive manner.

Potential or Actual Problem	A-D-M
1. Child regularly comes to table with dirty hands.	Discussion with child and agreement with child: dirty hands = no food. First step to meals = bathroom. A special new towel will be provided, chosen by the child.
2. 8 year old collects stamps - they are laying all over.	Provide a special box for stamps. Agree on a place where the box will be kept.
3. Child loses milk money.	Provide a small coin purse with child's name on it.
4. Child doesn't come home at times specified.	Provide inexpensive watch.
5. Child watches too much TV.	Agree on which programs to watch. Write a schedule for child naming each program, time, and channel.
6. Child's room is a mess--child should take responsibility for cleaning it.	Provide specific list of cleaning tasks: dirty clothes in hamper; all toys in the box or on shelves; dust the dressers and window sills; vacuum the floor and under the bed.

Each of the problems has the potential to be irritating everyday annoyances which require that the parent and child try to arrive at some solution. The friction these kinds of problems produce is great, and the price for both parents and child is greater than either needs to pay. The point is that all of these problems do not need to occur regularly. Granted, most children have messy bedrooms as in example #6 above, and every family must face this problem sooner or later--but, by anticipating and thinking through the problems, you as a parent can handle the situation in a positive, constructive manner. In this case, the parent saw that the child needed *specific* directions for room cleaning rather than the general instruction "*Clean your room.*" Children need to have very clear instructions: they do not yet have all the knowledge and "cleaning skills" that the parent possesses.

Advantages

Using A-D-M skills has a number of advantages that lend themselves to the development of healthy family relationships.

- Helps to head off a potential problem that could be unpleasant.
- Helps to constructively cope with already existing problems.
- Allows for the child to be included in the discussion and decision-making about the problem.
- Provides opportunities for the child to take responsibility for helping to make the family life successful.
- Helps give the child training in decision-making skills, an important part of adult life.
- Fits appropriately with empathic responding and "I-Messages." That is, all the skills complement one another and should be used together as is appropriate.

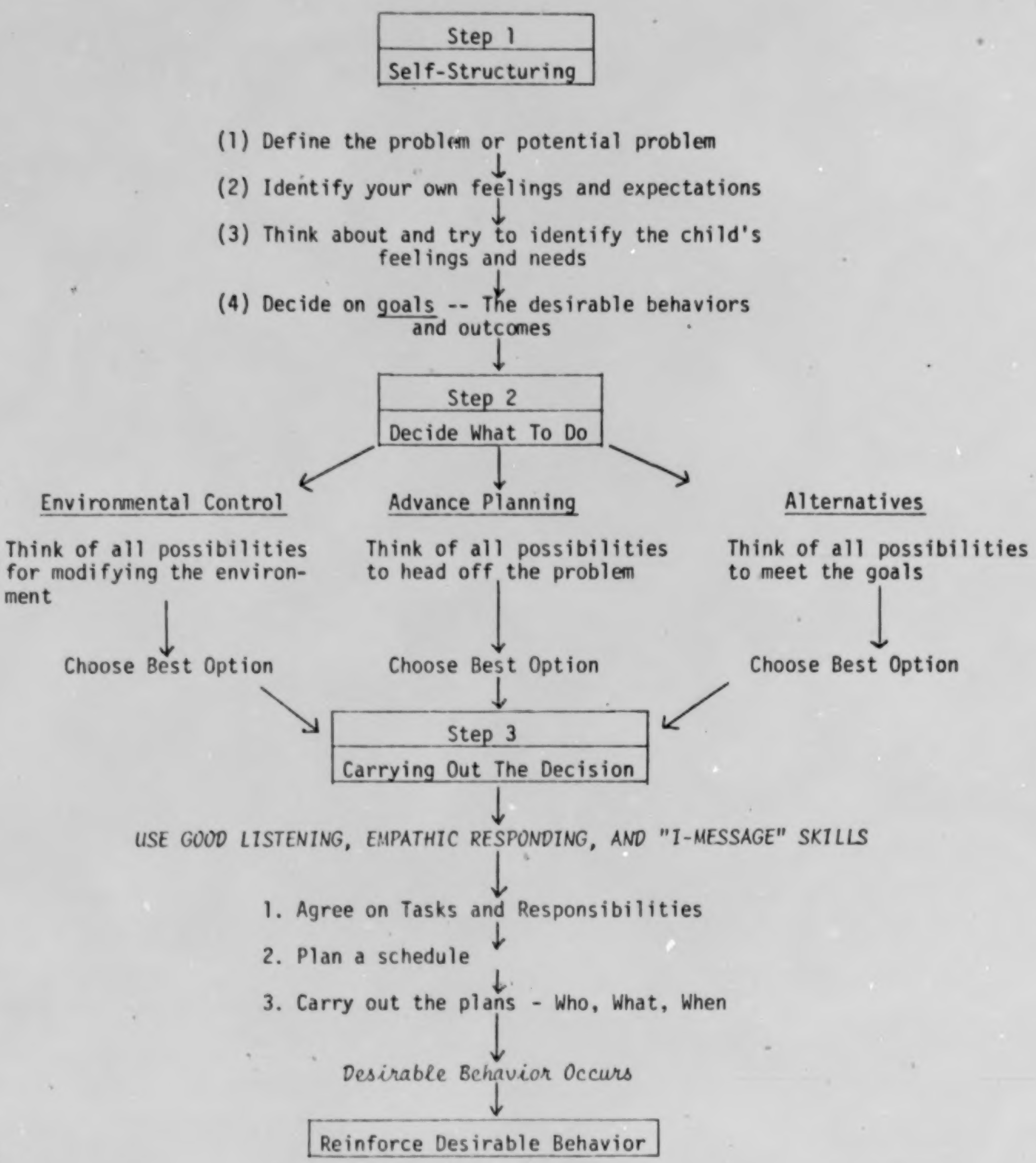
In discussing alternatives and making decisions with your child, it is helpful to use "open-ended" questions to guide their thinking in decision-making terms. Good questions to focus on include: "*What might we do to work out our problem? What else could we do? Can you think of another option we might do?*" "*What might happen if we did* (option 1)? *What do you think the outcome would be? What else might happen?*" "*What is important to us in making this decision? What do we want most to happen?*" These questions and other similar ones are ways of "*opening the door*" *in decision-making* with your child. Helping your child to learn skills for the process of decision-making--identifying alternatives and options, identifying likely consequences of each alternative, and clarifying what the important goals and values are--is the goal.

Conclusion

As was stated earlier, at first the steps in A-D-M may seem long. Your instructor will guide you and will provide opportunities to practice the skill. In a short time, however, you should be able to use A-D-M as a natural part of your own behavior as a parent. You will find that your efforts are well worth it.

Your Own Notes

ANTICIPATORY DECISION-MAKING FLOW CHART



Step 1
Self-Structuring

(1) Define the problem or potential problem

(2) Identify your own feelings and expectations

(3) Think about and try to identify the child's feelings and needs

(4) Decide on goals -- The desirable behaviors and outcomes

Step 2
Decide What To Do

Environmental Control

Think of all possibilities for modifying the environment

Choose Best Option

Advance Planning

Think of all possibilities to head off the problem

Choose Best Option

Alternatives

Think of all possibilities to meet the goals

Choose Best Option

Step 3
Carrying Out The Decision

USE GOOD LISTENING, EMPATHIC RESPONDING, AND "I-MESSAGE" SKILLS

1. Agree on Tasks and Responsibilities
2. Plan a schedule
3. Carry out the plans - Who, What, When

Desirable Behavior Occurs

Reinforce Desirable Behavior

Home Activity #5 Name ______________________

PROBLEM-SOLVING THROUGH ANTICIPATORY DECISION-MAKING

Directions: Based on your reading and on class discussion and practice, consider the following situations and apply the three A-D-M steps to head off or alleviate the problem. List all the ways you can think of, using the A-D-M *Flow Chart* to help you clarify each problem. Write out ideas, bits of likely conversations, and so on, pretending to role play the situation in your imagination.

1. Situation: Lory (10 year old) has been showing a lot of interest in science lately. She comes home from school talking enthusiastically about the class planting project and about how she can look into the microscope to see plant cells, and so on.

   Her pattern, though, has been to be interested in a particular subject or hobby for only a brief period of time and then go on to something else, never really developing any interests. You'd like to see her get more involved instead of jumping from one thing to another all the time. How can you apply anticipatory decision-making to this situation?

   Self-Structuring

   Define the Problem:

   Your Feelings:

   Lory's Feelings:

(continued on next page)

Goal:

Decide What To Do

Write down as many possibilities as you can think of - even if they aren't practical.

Choose Your Best Option:

Carry-Out The Decision

Describe what needs to be done in order to carry out the decision.

Who:

What:

When:

(continued on next page)

Write some of the things you might say to Lory.

How will you reinforce the desirable behaviors? Write what you may say or do.

2. Situation: It is report card time and you expect that your child may have a couple of poor grades to deal with. How will you use self-structuring to get ready to handle the situation most constructively if it arises? It will be a touchy situation for both of you. What would you say to your child and what might you want to suggest to identify the problems?

Immediate Problem:

Your Feelings:

Child's Feelings:

Goals:

(continued on next page)

What I'd want to say:

What I'd want to suggest:

3. Now think of a situation in your own family, preferably with your target child, that could be helped by A-D-M.

(a) Describe the situation

(b) Self-Structuring

Problem:

Your Feelings:

Child's Feelings:

Goals:

(continued on next page)

(c) Decide What To Do:

Write what you think you should do.

(d) Carrying Out The Decision

Try out your plan. Good luck!

Summarize your experiences: What did you do? How did it go? Success? Failure? Your questions or concerns?

Reading for Session 6

POSITIVE GUIDANCE

In a family, as in any group of people living together, each person has her or his unique needs and ideas. Conflicts between those needs or points of view are naturally going to occur. The day-to-day problems and conflicts that occur between parent and child or brother and sister are often accepted as "that's life." Everyone puts up with some frustrations and arguments, but resentment and anger do build up over time between various family members. You have already learned about A-D-M as one strategy for positive problem-solving in the family which reduces many conflicts and frustrations. The use of *logical consequences*, *encouragement*, and *family meetings* are additional methods for solving problems. We call these methods the Positive Guidance Skills. That is, they are *specific, positive alternatives* to the usual spanking, lecturing, and moralizing, and have been shown to be more effective.

What do you believe about your child?

Most adults and children behave in accord with what they expect to happen to them. If you expect your neighbor to smile when he greets you, you are more likely to smile first. You feel welcome and liked and your behavior shows it. If a parent expects a child to usually make mistakes, it is likely that the child *will* make mistakes: the parent communicates that belief to the child through words and gestures. If you expect your child to do well, chances are that she or he *will* do well. *The parent's attitude toward the child is an important influence on the child's behaviors and misbehaviors.*

Consider your own attitude: which of the following characteristics do you believe are true of your child?

She/He is:

dependable ____
sensitive ____
loving ____
lazy ____
hostile ____
happy ____

honest ____
a liar ____
selfish ____
proper ____
indifferent ____
tense ____

forgetful ____
careful ____
careless ____
complainer ____
cheerful ____
cranky ____

How do you think you communicate your beliefs to your child?

Children want to be liked by others just as much as parents do. They want to please their parents and to do the right thing. But often they do *not have the understanding or skills* to do what the parent assumes she or he can do--as when an eight year old interested in stamps cannot keep her new collection organized because she lacks the *mental abilities to organize* stamps (or anything else) at that age, though she will be able to later on, with some *positive guidance*. The stamps are left lying about with little or no attention to keeping them in a safe place. The parent is usually disappointed; the child tells herself, "*I didn't do it right even though I did the best I could, so I must be no good. I can't please my mother or father even when I try.*"

This happens over and over again, in different situations. The cycle that gets going is the *self-fulfilling prophecy*: a cycle of subtly or not-so subtly conveyed expectancies for failure, misbehavior, or clumsiness--> actual failure by the child--> disappointment or anger from the parent--> frustration for the child--> continued failures, disappointment and frustration are felt by child and parent. The child indeed becomes less motivated and more resistant to the parent's wishes while the parent becomes increasingly upset and angry and fully expects the child to do a lousy job no matter what is asked. *The parent, in essence, expects that the child will fail and the child carries out the parent's prophecy.* Children may have self-fulfilling prophecies about their parents as well. Such expectancies and their resulting behaviors are common to all human relationships.

The parent needs to break this destructive cycle by coming to terms with her or his own beliefs about the child and by considering *how to promote positive behaviors*. The parent needs to believe in and strengthen the "good" in the child: "*I can count on you*" and "*you are an important person in this family*" are important beliefs to communicate to your child. Similarly, communicating a trust that your child will behave in particular positive ways will go a long way to encourage those positive behaviors. If your underlying attitude to your child is positive and encouraging, using positive guidance skills will be most effective.

Positive Guidance

Positive guidance is probably a new skill for most parents, that is: *to actively guide* children to act responsibly, dependably, honestly, and independently. Because most parents grew up under a punishment-oriented system for training, they tend to think that to punish is the only way to really teach children responsibility, dependability and so on. They intend the punishment to be a corrective method of instructing the child in what is wrong or undesirable. However, usually punishment is ineffective because it is focused on the wrong-doing. It does not teach the child what is *right, preferable, or appropriate.*

Positive guidance focuses on the positive. Telling the child what is expected, firm but kind guidance in helping the child to do what is expected, and encouragement when the child does behave as you wish: these parental behaviors form the core of *Positive Guidance.*

This reading focuses on the three skills for being a positive guide for your child. They are *logical consequences, encouragement and the family meeting.*

Logical Consequences

Logical consequences are the *result of the child's own actions.* Allowing the child to experience the logical result of her or his behavior is an effective teaching strategy: This is what happens when you do 'x', that is what happens when you do 'y' or 'z'. If the child dawdles in the morning and misses the school bus, the logical consequences is *walking to school.* If the child forgets the "house rule" about putting her own wet mittens on the heater to dry as soon as she comes in, the logical consequence is *having wet mittens* when it is time to go outside again. If the child forgets (or refuses) to put her or his dirty clothes in the hamper, the logical consequence is that the *clothes do not get washed* and soon there are no clean clothes to wear. Using logical consequences provides the child opportunities to take responsibility for her or his own behavior. The child learns appropriate or desirable behavior by seeing that *there is a connection between what she or he does and the results from what she or he does.*

The idea of experiencing the logical consequences of one's actions is a very positive one. That is, it conveys through real experience how one's actions affect oneself and, in some instances, other people as well. The word "consequences" *does not imply negative outcomes*. It means *natural results or outcomes*, either positive or negative--or mixed. For example:

Behavior	Logical Consequence
Child learns spelling words	Gets an A on spelling test
Child does not study spelling	Gets a D on spelling test
Child comes home on time for dinner	Gets to eat dinner
Child comes home late for dinner	Goes without dinner or gets a cold dinner
Child returns library book on time	Gets to take out more books
Child returns library book late	Pays fine out of allowance
Child spends all of allowance on baseball cards and candy	Child has no money for another item she wants very much
Child saves money	Gets to buy the item she wants

Allowing the child to experience both the positive and negative consequences of behavior as she or he grows up *teaches the child about the real world*. Arbitrary or nonlogical punishments--such as a spanking for not sharing a toy or threatening that the child will not be allowed to watch TV if the bike isn't put away--do not educate children about the real world. Rather, they *confuse the issues* by not being logically related to the inappropriate behavior.

Negative punishment communicates frustration, annoyance, fury, but: these feelings can be *better communicated* through giving "I-Messages" and explaining clearly how the behavior has made the parent feel, how it has affected her or him, and other people. The parent does not teach by controlling but rather *by letting the child know just what may happen following particular patterns of behavior and the feelings that will be experienced.* The key to logical consequences is to *discuss with the child beforehand* how you expect her or him to behave, the steps she or he can take to carry that out, and the logical consequences--the results--of doing or not doing it. *Being clear* and *being realistic* about what the child can actually do is extremely important in positive guidance through logical consequences.

When you do have a problem or if you anticipate one, do discuss with your child the nature of the problem and your mutual roles in resolving the problem. Being calm, factual, kind, and firm rather than emotionally explosive or threatening will allow your child to hear you--and will allow you to hear your child. For instance, you may become fed up with picking up after everyone, especially the child. Through self-structuring, you have identified the problem, your feelings, the child's feelings and likely strategies for resolving the problem. You go one step further and identify the logical consequences of your preferred way of acting: in talking with your child, your message may be "*Each person in our house is responsible for putting the dirty clothes in the hamper. I will only wash what is in the hamper. I will no longer pick up everybody's clothes, including yours. So if you don't pick up your clothes and put them in the hamper, they won't get washed. If you do pick up your clothes and put them in the hamper, they will get washed--and ironed and hung up--and you will have the clean clothes you need.*" Logical consequences allow your child to experience life the way it is and to learn responsibility for her or his own behavior. Your role is to help the child identify the desirable ways to act and anticipate the consequences. You guide the child in a positive way, affirming the child's good intentions and her or his abilities to succeed and live with her or his choices.

Logical consequences are easier to understand than to carry out, however. Parents often take care of things that frequently should be the child's responsibility--being sure mittens get dry, picking up dirty clothes, talking the child into eating dinner, telling a 12 year old when it's time to leave for school, and so on. The parent's urge to help, to intervene, to solve the problem must to a large extent, be checked. Lots of will power and determination are necessary to exercise positive guidance. Mistakes will be made, problems will occur. Your child will not, by any means, always choose to act in the more desirable manner. Avoid an "I told you so" message. Rather, in a matter-of-fact way, allow the child to experience the logical consequences. With a more serious problem, it is wise to discuss the alternatives again afterwards. With less serious ones, it is likely that the child will shortly choose the positive consequences.

It sounds good but ....

Aren't there times when logical consequences should not be used? Yes: *when the logical consequences of the child's actions present a clear health* *or safety hazard to self and/or others*, logical consequences cannot be allowed to occur. A rule about the behavior should be considered. Rules can be useful, if they are *kept to a minimum*, if they are *stated positively and clearly*, and if they are *consistently enforced*.

For example, the child needs to learn regular teeth brushing habits for obvious health reasons. The logical consequences of not brushing or of irregular brushing are cavities, stained teeth, and bad breath. Allowing the child to experience these consequences is irresponsible and unwise. A clear firm rule which will help the child to establish the habit should be made: "*We brush our teeth after breakfast and before bedtime. Every member of our family brushes their teeth two times a day.*" Another example might be that of a four year old riding her bicycle in the neighborhood streets. The logical consequences may involve an accident or getting lost, neither of which are safe. A clear, firm rule needs to be set up: "*The rule is that you may ride your bike on the sidewalks, but not in the streets. You must tell me where you are going before you go riding.*" Encouragement and praise for following the rule must be consistently given. Logical consequences of forgetting or disobeying this rule can be enforced, including *as part of the rule* a loss of riding privileges for a period of time if the rule is not followed. In this case, consequences are related to the expected behaviors (riding on the sidewalk) and are meaningful to the child.

Sometimes you may decide, through self-structuring, that you have to impose a rule if the logical consequences are not meaningful to the child. If the child does not care very much about her or his progress in school, she or he may be lax about homework. Doing poorly in school, the logical consequence, will not provide the usual incentive to change. In this case, you may decide to impose a rule that will provide a consequence which is important for the child: "Do your homework first, then you may play. No playing unless your homework is completed and is carefully done."

Another example is the problem of 8 year old Tom who doesn't care whether or not he has clean clothes on. His parents believe that on school days he should leave the house dressed in a clean shirt and in clean rather than dirty jeans. Tom prefers to wear the same football shirt day after day. The parents decided to establish a rule - "Clean clothes on school days." Since no logical consequence was appropriate, an imposed consequence of--"No breakfast until you are dressed in clean clothes"--was the next best choice. After two days of resistance and arguing, Tom fell into following the school clothing rule quite willingly. His parents handled the situation very matter-of-factly and did not fall prey to his initial resistance to the rule. They were careful not to get into arguments with him or become angry at his objections to the rule.

Guidelines for making a rule

1. *A rule must be stated in clear, positive words.* *"Park the bicycle on the grass only"* rather than *"If you keep parking your bike in the driveway, I'm going to run over it."* Other positive examples might be, *"Coats go on hooks in the closet"* rather than *"Don't drop your coats where you take them off"* or *"Your hands need to be washed before dinner every evening"* rather than *"Dirty hands look awful and might make you sick."*

2. *A rule must be enforceable.* It must have a consequence which will follow if the rule is broken. Withdrawing bike riding privileges for ignoring the rule about safekeeping of the bike is one example given earlier. Another example is when the child forgets to put the family records away after using them. The rule is that records must be replaced after playing them so that they will not be damaged. It is enforced by taking away the child's record using privilege for a certain amount of time. This enforcement of rule is not punishment, but rather the logical result of failure to follow an important rule.

A rule is doomed to fail unless it can be enforced. The rule--*"You aren't allowed to get your clothes dirty"*--is unenforceable. It is unrealistic and too vague to be very meaningful to either the parent or child.

3. *The rule and its consequences are discussed beforehand with the child.* Both the parent and child need to clearly understand the rule and its implications and the child needs to be given the opportunity to follow the rule. Discuss with your child the rule, its reasons and what the consequences are. Of course, use your listening skills in this kind of conversation so that you and your child will both understand one another.

If ten year old Joe is having trouble completing his homework on his own, he may need some positive guidance from his parents. After thinking through the problem his parents might say. *"Getting your homework done seems to be hard for you. It is very important for you to do it, however, so that you will learn and be better able to understand things. You are responsible for getting it done. I think the TV often distracts you; and Dad and I believe* *that this rule may help you. Do your homework first, then let one of us go over it with you, and then you may watch TV. If you do not do your homework completely and carefully, no TV that night."* Discussing a rule this way is exercising positive guidance: you are telling the child what your expectations are, what to do, and what is going to happen when the expectations are or are not met.

Joe may not follow your instructions exactly on the first try. The parent *may have to go over the rule carefully two or three times* before it "sinks in." Once you are sure your child understands the rule, you will impose the consequences if the rule is broken.

Above all, when the child does carry out your expectations, *be sure to acknowledge it.* Encouragement and praise in doing things well goes a long way in consistently enforcing important rules.

Encouragement

Encouragement is positively reinforcing the behaviors that you want to see continued. Encouragement points out to the child what she or he is doing well and gives the child the added incentive to continue. It can take many forms and styles according to each individual parent. Some examples are:

- A smile
- *"Good work."*
- *"I'm proud of you."* ("I-Message")
- A pat on the back
- *"You're a real ball player!"*
- *"Good try!"*
- *"Keep trying, I know it's hard to do."*

Encouragement is also a necessary part of positive guidance. In evaluating what the child has done, it is important to point out the good things as well as the problems. Through this, the child begins to understand exactly what is important to repeat and what to avoid. Encouragement for the things well done and for the appreciated behaviors will add valuable impact to the experience of logical consequences. Indeed, receiving encouragement for positive behavior is itself a *positive logical consequence.*

Encouragement means being supportive to your child in whatever way is appropriate. Perhaps the most important encouraging message is letting the child know that she or he is accepted and acceptable regardless of success or failure. Particular behaviors may not be preferred, but the child as a person is always loved. Giving recognition for effort is very important; "good try" messages should be frequent. Always praise the well done task (*"Great job cleaning up the garage--you swept away all the dirt and put everything in its proper place."*) or desirable behavior (*"I liked the way you shared your toys with Jonathan. Keep it up."*).

Giving encouragement is a way of reinforcing desirable behavior. Reinforcement builds up desirable behavior in gradual steps. Having realistic expectations, not demanding too much at once, and capitalizing on the child's individual assets and strengths allows both of you to pursue learning in small but progressive steps--with sufficient encouragement and attention to the good points by you.

The Family Meeting

Encouragement, anticipatory decision-making, and positive guidance may be effectively promoted through the *family meeting*, a time when the family *shares ideas about mutual problems and considers how to resolve them.* Children need to be included as active participants in the family organization--and the family is an organization with tasks and responsibilities, conflicts, goals, and a lot of affection. For each person in the family to learn how to be a responsible family member--and a responsible individual in society--it is necessary to involve them in the decision-making about goals, tasks, problems, conflicts, and solutions. When children are included in the family meeting, they are more likely to feel and act like family members who can be depended upon. In addition, children are often extremely creative and helpful in arriving at agreeable solutions.

Families today lead busy, complicated lives. Both parents have much to do, the children are involved in school and have extracurricular activities such as clubs, group meetings, farming, music lessons, or just meeting with friends. Schedules often conflict. It is a rare moment when everyone is free to discuss a family problem on the spur of the moment. The family meeting deliberately *builds in that special time* and *provides the consistent opportunity* to discuss mutual family concerns. Most families find it helpful to set aside a certain time during the week when various concerns and problems can be discussed by all and dealt with constructively. It is a special time set aside for the entire family, with each person being an important part of the meeting. Needless to say, it is an important time for parents to practice, as usual, their good listening, empathic responding, and "I-Message" skills to promote the best atmosphere for sharing problems and opinions and for generating creative solutions.

Your Own Notes

Home Activity #6 Name ____________________

PRACTICE IN POSITIVE GUIDANCE

Directions: Read each situation below. Then write down the undesirable behavior, the logical consequence and the desirable behavior.

1. Jim continues to dawdle and waste time in getting ready for school each morning. His parents continually remind him to hurry up. Generally, he just makes it to the bus but he did miss it three times in the last two weeks. His mother drove him to school on those days.

   Undesirable Behavior:

   Desirable Behavior:

   Logical Consequence:

2. Linda and Jackie, ages 11 and 9, are arguing over what to watch on TV. Each one keeps turning the channel back to what she wants to watch. It is not only hard on everybody's ears and nerves but on the TV set as well.

   Undesirable Behavior:

(continued on next page)

Desirable Behavior:

Logical Consequence:

3. The Smith's believe that everyone should wash their hands before eating dinner. Seven year old Jeff has to be told every day, "*Wash your hands.*" He doesn't seem to learn, and his usual response is one of bulking or whining, "*My hands aren't dirty,*" etc. Everyone is tired of regularly going through this little scene.

Undesirable Behavior:

Desirable Behavior:

Logical Consequences:

(continued on next page)

4. Karen, age 6, seems jealous of the baby in the family, 2 year old Russ. She teases him by taking away his toys. Naturally, Russ gets upset and cries. This goes on several times a day. (This one may be controversial. We will discuss it in class.)

Undesirable Behavior:

Desirable Behavior:

Logical Consequence:

As you were doing #1, 2, 3, and 4, you probably thought that just figuring out what the problem is isn't enough to solve the problem. You're right. Solving a problem with your child usually requires a combination of the skills you have learned.

Now go back to the four situations and list additional things that you think should be said or done. Use any or all of the previous skills you've already learned. Write down the exact words you might say.

1. Jim misses the bus:

(continued on next page)

2. Linda, Jackie, and the TV:

3. Jeff's dirty hands:

4. Karen teases the baby:

Putting what you've learned to work

Here is the most important part of your assignment. Choose a problem that you are having with your own child that you think might be resolved through the use of positive guidance.

Describe the Problem:

How have you been handling it?

(continued on next page)

Write out your solution based on the skills you've learned:

Try it out - We will discuss your experiences in the next class. Come with your questions, successes and problems, and we will all help each other. Good Luck!

UNIT IV

DRUG EDUCATION IN THE FAMILY

4

Reading for Sessions 7 and 8

DRUG EDUCATION IN THE FAMILY[1]

The use of drugs is part of daily life. Drugs help us sleep, wake, lose weight, stop coughing, clear sinuses, calm nerves, and relieve pain. But the excessive or inappropriate use of any drug, including alcohol, can be physically and psychologically harmful.

Most parents know this and want their children to know it. But in spite of these good intentions, what children learn about alcohol and other drugs may be just the opposite of what their parents wish to have them learn. This happens because children are influenced more by what parents *do* than by what parents *say*.

Consider the following statement by a researcher on the patterns of drug use in America:

> "On a given day an American adult is likely to ingest 4-5 identifiable chemical compounds that are pharmaceutical in nature. Consider the individual who arises in the morning, brushes his teeth with toothpaste containing flouride, downs a Bromoseltzer, has two cups of coffee containing caffeine, takes a dexedrine to help him with his weight control problem, lights his post-coffee cigarette containing nicotine and heads for a round of events in the business or professional world which may include cocktails and wine with meals followed by brandy and a good cigar -- this individual is more likely to be typical than unusual."[2]

You may not behave in this particular way with drugs, but you would probably be surprised if you stopped to consider your own pattern of drug use and the variety of drugs you typically consume. In order to help your children make wise decisions about drugs, you will want to be clear about your own use and your related values. In addition, the channels of communication with your children need to be established and kept clear. Especially, this means making sure that *what you say with your actions is consistent with your words.*

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[1] Adapted from D'Augelli, J. Frankel and Weener, J. M. Do As I Do: The Parents Role in Alcohol Abuse Prevention. University Park, Pa.: Continuing Education Press, 1975.

[2] Lipscomb, W. R. An epidemiology of drug use-abuse. Journal of Public Health, 61, 1971, 1794-1800.

Whether or not you drink or use other drugs, you can become better communicators by asking yourself: *What messages about drug use*--drinking, pill taking, smoking, etc.--*are my children now receiving from hearing and watching me? Are those the messages I want to send? How can I be more effective in teaching those things about drugs that I would like my children to learn?* This unit is designed to help parents answer these questions and become better communicators and drug educators through

1) defining your own drug values,
2) setting a good example, and
3) taking advantage of opportunities for direct teaching while continuing to practice other good communication and parenting skills.

Actions Speak Louder Than Words

Children learn a great deal from adults, and much of what they learn comes from watching adults and imitating them. Most of a child's repertoire of language, actions, and attitudes is developed through observing the important people in her or his life--mainly parents. In other words, the child's behavior is *modeled* after the behavior of those important people. Parents give many messages to their children. Some are carried through words, but many more are communicated through what the parent does in behavior and gestures such as facial expressions, body posture, voice tone, and touch. Researchers have estimated that as little as seven percent of our communication is through words alone.

When we want to say, "*I love you,*" we usually hug or kiss or give a certain glance. If we are angry, we communicate our anger as powerfully with the hard tone of our voices and by scowling as we do with our words. If we drink liquor, we are "*saying*" that it is okay, or even good, to drink. Children learn these "messages" and frequently imitate us as they play with dolls, pets, or with other children.

It is true that "*actions speak louder than words.*" Not only do our actions "say" more than our words, they sometimes "say" something quite the opposite. Children are sensitive to our words as well as our actions and are quick to see contradictions between the two. They learn most of their attitudes, actions, values, and prejudices through watching and being with other people. They watch, think about, imitate, and adapt what they see their parents and others doing. They are likely to become confused, however, if the parents' actions they see are inconsistent with the words they hear.

When Jennifer, a fourteen year old ex-alcoholic, was asked on a Merv Griffin Show why she started to drink, she said, "*I wanted to be an adult. I wanted to feel good like I thought my parents were feeling - and they drank. So I drank, too, even though my parents told me I shouldn't, that it was bad for me.*"

Larry, who, at sixteen, has been through an alcoholic treatment program and has been sober three months, confides "*I used to take my old man's beer. I drank because I wanted to be like him - yeah, I thought a lot of him. I wanted to be like a grown-up, like him.*"

Donna, a bright fifteen year old, confided that she smokes marijuana on occasion at parties. She says that marijuana seems to be safer than liquor and is certainly less harmful than tobacco--"*Why, my parents both smoke and say they just can't quit even though it's not healthy. Besides, smoking grass is a social thing, like drinking--it's relaxing. I like to relax like my parents do.*"

Larry's and Jennifer's parents did not set out to teach their children to drink. In fact, the youngsters undoubtedly drank without their parent's spoken permission. Donna's parents would probably be unhappy with her decision to smoke marijuana. But two things are evident: both alcohol and marijuana were available and to a greater or lesser degree, socially accepted, and *two important models* whom the kids loved, admired, and imitated were available as well.

There are obviously millions of youngsters who grow up with drinking parents without becoming alcoholics. Similarly, not every child of parents who smoke cigarettes and drink liquor to relax will choose to smoke marijuana. But, the point is that a *parental example*--especially over the many years of growing up--*is a powerful influence*, an influence of which the parents are often not even aware. Although only a few children become alcoholics or chronic drug users, every child is profoundly affected by the parent's use of alcohol and other drugs. Research indicates that the more drugs a parent consistently uses, the more likely the child will use drugs, legally or illegally.

The child of a nondrug-using parent, including nondrinkers, may face similar contradictions between what she or he is told by her or his parents and what is seen going on around her or him. In this case, the parent "*practices what she or he preaches*," but the influences of other important adult models such as relatives or friends, must be considered. When these models contradict the verbal messages of the parent, confusion is likely to result.

Reliance upon "scare tactics" is particularly prone to failure. Most teenagers have either experimented with alcohol or know someone who drinks without disastrous consequences. Most teenagers are also familiar with friends, acquaintances, or adults who use one of a variety of other drugs and continue to carry on productive lives. Certainly, "scare tactics" with respect to marijuana use are inclined to fail, given the widespread acquaintance with the drug's effects and the increasing research that suggests no ill effects. Horror stories about alcoholics have little effect because alcoholism is identified in the youngster's mind as a problem of middle age, not of youth. Horror stories about heroin addiction are similarly ineffective because that too is perceived as a distant phenomenon for most children in most communities. Generally, children have been acquainted with adults and older children who use alcohol and other drugs with no apparent ill effects. It is therefore no wonder that young people are often unmoved by warnings, threats, and verbal prohibitions.

Do As I Do?

Any parent, whether a total abstainer or not, should remember that "*do as I do*" is a much more powerful teacher than "do as I say." Awareness of the nonverbal messages children get through modeling will help parents guide their children in the direction they want them to go. The following questions are designed to help parents increase awareness of the messages they give their children through their own behavior. *The key questions to keep in mind are:*

1) What are you as a parent saying through your drug use?
2) Is this really what you want to say?

If you drink and/or use other drugs:

- When you are with friends, is drinking required in order to be "one of the gang?"

- Do you find you smoke more with friends who smoke? at parties?
- Do you exert pressure on others to drink? to use other drugs?
- Do you go along when others put pressure on you?
- Do you drink when you are angry or tense? Do you use tranquillizers? sleeping pills? coffee/tea?
- Do you use alcohol or other drugs to escape from a problem or to relieve boredom?
- Do you regard drinking as proof of adult status?
- Do you view over-indulgence as comical? (Dean Martin, "the tipsy comic")
- Do you sometimes drink for the sake of drinking, rather than as an enhancement of your activities such as eating or socializing?
- Do you condemn use of other drugs on moral grounds and therefore condemn those who choose to do so?

For Nondrinkers:

- Do you say that having a drink will make one an alcoholic, criminal, or bum? What about other drugs?
- Do you condemn drinking on strictly moral grounds and, therefore, condemn those who choose to drink?
- Do you use other drugs--tranquilizers, sleeping pills, etc.--when you are angry, tense, or looking for escape?
- Are there important adults in your child's life whose behavior may contradict the beliefs you hold about alcohol?

A "yes" answer to any of the above questions indicates that the parent may be sending messages that she or he would rather not have the children receive. Of course, no one is a perfect model, and the parent who went through life without setting a bad example now and then would not be human. The important thing is to recognize the importance of modeling and *use it in a positive way* as much as possible.

Direct Teaching Is Also Needed

Parents can also foster a responsible attitude toward drug use by other means in conjunction with modeling. Children do not have the skill or knowledge to know how to use alcohol or other drugs wisely. *They need to be taught.* The way parents can use *direct teaching* most comfortably and profitably is to take advantage of natural opportunities as they arise in everyday life. Child psychologists have found that children learn best when they are developmentally *ready to learn*, not necessarily when adults want them to learn. Children show that they are ready by asking questions, making comments, or indicating by gesture that they would like to know something. These questions, comments, and gestures signify what educators call *teachable moments*, points in time when the child not only is ready to learn, but actively wants to learn.

Parents should try to *capitalize on teachable moments as they occur.* For example, a teachable moment might occur when your daughter asks why you drink while you're watching football or some other TV program. In such a moment you can tell your child, "*Because I like to.*" Or, you can teach much more *directly* by adding:

> "*I like the taste of it. Also, because I sometimes like all of my body to be relaxed. Liquor makes the body relax. So if I'm watching TV or waiting for supper, and I want to be really relaxed, sometimes I have a drink.*"

Another time you might add:

> "*I only drink to get relaxed if I have nothing important to do. If I had to work or drive, I wouldn't drink.*"

You might want to further explain why you drink only one or two bottles of beer instead of six or eight or ten at one time.

The point is that your child will learn from you that drinking is okay *within certain guidelines*. When you explain your own reasons and feelings and include factual information a little at a time, your child begins to learn how to use alcohol appropriately and responsibly.

Teachable moments also occur in the homes of nondrinking parents. In such a moment your child may ask, "*Why do you always drink iced tea? Why don't you drink beer like Johnny's dad?*" Here you can honestly give your reasons for not drinking, but in a manner that does not degrade the father of your child's friend. One parent might say:

> "*Well, I really don't like beer, and iced tea is something I can share with you.*"

Another might answer:

> "*Well, some people like beer and other drinks that have alcohol in them. But I know that drinking can be bad for me. I'd rather drink something that doesn't have alcohol in it but still tastes good.*"

Similarly with regard to other commonly used drugs you might tell your child, "*I only take aspirin when I have a fever or a bad headache, not every time I have a little ache or pain. I have a very bad headache now, so I will take two aspirin--the right dosage for adults.*"

Or, "*I just smoke once in a while, once every three days or so, because smoking can become habit forming. It's addicting. That means if I smoke regularly my mind and body would begin to crave cigarettes and I couldn't do without them. I don't want to get into the habit, so I only smoke once every few days. That's hard for most people to do, but I made that decision for myself and I'm sticking to it.*"

However you respond, it's important to let your child know how *you think and feel* so that she or he will continue to look up to you without looking down on others. Communicate accurate information, geared to the understanding of the child, about the drug(s) under discussion. Seek out information with the child if it is not readily available or there are questions either of you--or the whole family--has. That is, use your parenting skills in direct teaching, as well as in other areas of family living.

Children Can Read Between the Lines

The way a parent responds to a teachable moment can give messages that go far beyond the words that are actually spoken. The parent's whole attitude toward the child can be reflected in the character of the parents' response, her or his tone of voice, gestures, and so on. Consider this example: Jesse, a ten year old, suddenly asks his mother, "*Mom, why do you always have a drink at night before we eat supper?*" Jesse's mother might respond in one of two ways:

1) "*It's none of your business, Jesse.*"
2) "*Well, I just like to have a drink. I'm not sure I know why. I think it relaxes me after a hard day's work. Sometimes I think I shouldn't work so hard and fast that I get so tense. Then I wouldn't want that drink before supper.*"

Take a few minutes to think about the different ways of responding to that one question the child posed. First, think about what the child might learn from the words themselves. Second, think about *other messages* the child might hear from each of the different answers.

In the first case, when the parent responded by saying, "It's none of your business," the child would probably hear more than those few words.

He would most likely hear this too:

> *"I am very hassled and you are hassling me more. You are too stupid or too young to know about me, about alcohol, about life. Your questions are not worth bothering with. My drinking is my business, so leave me alone."*

If Jesse "hears" this, he is likely to become very unhappy, frustrated, and dissatisfied with himself. As he grows, he may turn to liquor or other drugs to cope with some of these frustrations and self-doubts. He will have learned that liquor can be an escape from hassles.

In the second case, the mother responded by saying, "Well, I just like to have a drink. I'm not sure why, etc." The message to the child, especially if accompanied by warm voice tones and gestures, is:

> *"You can ask me whatever you like. You have a right to know my reasons for doing things. I respect your wanting to know."*

This child will most likely feel good about himself and will feel that people are to be liked, trusted, and enjoyed. His frustrations are likely to be fewer than those alluded to in the first case, because he is receiving different messages *about his worth as a person.*

These messages are not spoken words. Yet, children almost always "hear" them through watching their parents and others and by trying to figure out what their parents feel, think, and find value in doing. We must learn to interpret our own behavior and to deliberately communicate what we truly think and feel through actions, tone, expressions, and movement. If we don't, we will miss out on some wonderful opportunities to educate our children. Healthy, open communication is called for. Such communication does not place any rights or wrongs on what the child is thinking and feeling. Often parents get so caught up in "teaching" their child some new "lesson" that they miss what the child is trying to communicate to them. While it is necessary to "teach" many things to children, parents can get so carried away with their role as "teacher" that the child's feelings and thoughts seldom get heard.

Direct Teaching in Teachable Moments is not focused solely on providing information. Rather, it involves sharing feelings, information, and ideas as well as seeking accurate data on which to base opinions and decisions. Encouraging the child to talk about what she or he is thinking and feeling is a major part of the process. Let your child know you are really paying attention. And help your child pay attention to you--your reasons for using and not using drugs under different conditions on varying occasions. The messages communicated will be:

1) *I care and understand how you feel and think.*
2) *You are a valuable person and deserve my attention.*
3) *I would like you to understand me, too.*

Your behaviors and their messages will strongly influence how your child views herself or himself. How your child thinks and feels about herself or himself is related to how your child may use or abuse alcohol and other drugs. Research suggests that people with poor self-concepts, who see themselves as unloved and unaccepted, are more likely to abuse alcohol and other drugs than are people who feel good about themselves and have self-confidence.

Learning the wise use of alcohol or any other drug is not a "one-lesson" happening. *Learning takes place over a period of years and occurs in many different situations.* The definition of *responsible use* will change as the child matures. It is the right and, indeed, the responsibility of parents to actively participate in the alcohol and drug education of their children. Parents are in a uniquely good position to educate their children with love, humor, and the deep sincerity of their convictions. We must also remember to do it naturally, and with need to each child's "messages" to us about what he or she is thinking and feeling. Modeling, Direct Teaching at the Teachable Moments, Good Listening, and an open exchange of feelings and opinions are some of the ways to reach our children, to be with them, and to educate them responsibly.

Your Own Notes

Home Activity #7 Name ______________________

YOUR VALUES AND DRUG USE

Set aside a half hour or so this week to think about your own ideas and values. Find time to share with your spouse or friend your ideas, concerns, and points of view about drug use, your own drug behaviors, and your wishes for your child's drug behavior.

Using the communication skills you've learned, address yourself to the questions below. These are difficult to deal with: This assignment is meant to encourage you to think about the issues so that you can begin to clarify your own position regarding responsible drug use and how to educate your children. There are, of course, no right or wrong answers. We will take up these issues again in class.

Directions: Summarize your current thinking on each question which resulted from your conversations this week.

I. Opinions about drug use are part of a set of values and your "philosophy of life." Try to define some of your own values about the use and abuse of these drugs.

Example: I believe that drinking too much alcohol is a way of denying or "copping out" of real life. It is one way to avoid or to forget one's problems. Responsible use, on the other hand, is a way of getting the most out of life.

A. Stimulants and Sedatives (pep pills, diet pills, Sominex, No-Doz, tranquilizers):

(continued on next page)

B. Alcohol:

C. Marijuana:

D. Tobacco:

II. When do *you* use alcohol and other drugs? On what kinds of occasions? For what kinds of reasons? If you do *not* use any drugs, why not?

Example: I use sedatives on rare occasions. I have a prescription for sleeping pills which I received during a time of family crisis. I used them every night at that time, two years ago. Now, I take one or two at times of stress at work maybe every four or five months: bad stress, not just the usual. I don't use stimulants--or I guess I do since I drink lots of coffee, four or five cups a day. Sometimes six. I like the taste. It keeps me going. It's non-fattening. And it's hard not to have a cup when others do, at work or at home.

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A. Stimulants and Sedatives:

B. Alcohol:

C. Marijuana:

D. Tobacco:

E. Other (if any):

(continued on next page)

III. What are the worries that you have about your son/daughter which relate to using drugs?

Example: Cindy seems to have a hard time deciding anything--even small things. She can easily be talked into something. I'm afraid she will be talked into using alcohol or other drugs when her friends put pressure on her.

A. Stimulants and Sedatives

B. Alcohol

C. Marijuana:

D. Tobacco:

(continued on next page)

IV. How can you use the problem-solving skills of this course to help your son or daughter to be better equipped to handle drug use issues when they do arise? Try to be very specific.

Example: I'd like to try to use the good listening skills when Julie brings up a drug or alcohol question. I feel that if I can listen carefully, I will better understand her point of view. I will also be able to help her explore her feelings as she matures. I'm not sure if that's enough though.

V. List several ways in which you would like to take a more deliberate role in your child's drug education.

1.

(continued on next page)

Home Activity #8 Name ______________________

TEACHING YOUR CHILD ABOUT DRUGS AND ALCOHOL

Directions:

You have spent the last seven weeks learning several new parenting skills that may be helpful to you in enhancing your own family relationships. As you have probably already discovered, each skill, (good listening, empathic responding, A-D-M, and so on) used by itself, is often not enough to make a meaningful interaction with your child. It is important then, that you can use these skills in an integrated fashion and that you can use the skills together in a natural sequence.

This homework is intended to give you experience in using all of the skills you've learned in the course and to be an opportunity for you to practice some direct teaching in the "Teachable Moment" style at the same time.

How could you capitalize on a Teachable Moment in the following situation? Of course, there are various ways to handle the situation. Using the skills you have learned, write down some responses that would be appropriate to make if you were in the situation.

Write a dialogue between you and your child as you think it might actually occur. The point here is to strive for a combination of the skills you've learned: that is, learning to comfortably use any or all of them that a situation may call for.

1. Your child (10 year old) is reading the label of a cough medicine prescription you just picked up from the pharmacy. She asks: *"What is codeine? Why does the label say that this cannot be refilled without doctor's permission?"*

2. A close family member (mother, brother, etc., with whom you were very close) has very recently died and your job is also in jeopardy. Needless to say, you are under a great deal of stress right now. Your doctor has prescribed a tranquilizer to help you through this period. Your 12 year old asks you: *"What are these yellow pills? How come you need them?"*

3. You and your spouse are having a beer in the backyard on a hot afternoon. Your child asks for a bottle: *"I want some beer, too--a whole bottle. I'd like it, I know I would--since you both like it."*

4. Your child hears the word marijuana on TV and also sees it occasionally in the newspaper. She or he is curious and wants to know more. She or he asks, "*What is marijuana? Does it make you feel good? What is it used for?*"

5. Your neighbor is pregnant. She was visiting with you but has developed a headache. You offered her some aspirin but she declined it saying, "*I don't use aspirin now that I'm pregnant. I don't want to hurt the baby or myself, so I'm avoiding aspirin and other drugs too.*" Later on, your eight year old asks you, "*How come women are afraid to take aspirin when they're having a baby?*"

UNIT V

CONCLUSION: ASSESSMENT OF GOAL ATTAINMENT

5

Reading for Session 9

YOU'RE ON YOUR OWN

You now have spent a number of weeks thinking and learning about how to enhance relationships in your family. The purpose of this reading is to focus upon what it means for you now that the conclusion of the CAPS *Program* is nearing.

Ending the course probably brings a sense of satisfaction and achievement. Thinking about and practicing several relatively new skills takes a great deal of effort and commitment. Finding that you *can make changes* in your own behavior, however, is important to know--often, we tend to feel that such changes are next to impossible. Many, if not all of you, have discovered that your understanding of your children has begun to increase and that your sensitivity to their problems and viewpoints has deepened. A number of you have already begun to see changes in your children's behavior and ways of relating to you. If you continue to practice the skills until they become "*second nature*" to you, many constructive changes in the way your family relates to one another will continue to occur. The important thing is to *expect gradual change* along with some obstacles, but draw on your new ways of thinking and acting to confront problems.

As the course ends, some feelings of uneasiness may be experienced as well. While you have dealt with some of your questions during the program, in class and at home, others were not discussed. New questions and concerns have probably also arisen. Many parents express the wish for the program to continue so that they can continue to practice the skills with some guidance and feedback. They still are unsure of themselves. Sometimes they still have questions about what to say when and how. Whichever it is, there is still "unfinished business." You probably don't feel like a master of all the skills you have learned.

Despite this lack of closure, parents often feel some relief. Like their children, they feel good to be free of assigned readings and home activities. A breathing space is needed: time to think about what was read, learned, and experienced without outside pressures. This is a time to continue practicing the skills so that they become a natural part of your behavior, while at the same time you sort out what is most meaningful to you and how you can apply it to your unique family situation.

The sense of loss that is often felt is the loss of the *support, encouragement, and comaraderie* given by the others in the group. You have had the opportunity to learn new skills and share ideas, doubts, and successes with a number of other parents in a more structured way than usual. Most parents who have participated in CAPS have commented on how good it was to know that other parents experience the same problems and worries. It was good to talk together about some of them, to see how others handle those issues and to arrive at useful solutions. *Not all contact with friends in the group need be lost:* some parents become fast friends and continue to socialize and discuss relationship issues. Others call each other, on occation, to discuss concerns or ideas about how to skillfully deal with specific situations. Still others decide, using their A-D-M skills of course, *to continue meeting as a group on their own.* Several such groups have continued to meet for a year or longer.

But, the fact of the matter is that really *you're on your own.* You have to shape *your own style of parenting*, a way of acting with which you are comfortable and which will help you meet your parenting goals. The skills which you were taught have been found, on the basis of parents' own experiences and research, to be useful. They foster satisfying relationships within the family and even help to develop satisfying adult relationships. Your success with what you have learned depends upon your *continued commitment to the principles* which form the basis for the skills. Following is a summary of the principles presented in the course:

1) Sensitivity to feelings--your child's and your own.
2) Listening for feelings first.
3) Labeling and summarizing the feelings as well as content.
4) Anticipating upcoming situations and events.
5) Preventing problems by planning ahead.
6) Preventing problems through decision-making.
7) Involving the child in decision-making.
8) Discussing and agreeing on responsibilities in carrying out plans.
9) Emphasizing the positive in behaviors.
10) Clearly stating expectations and needs.
11) Reviewing and stating the logical consequences of behaviors--positive and negative.
12) Using house rules when health or safety is endangered.

13) Stating house rules in a clear, positive way, including their consequences.
14) Giving encouragement for making good attempts to meet expectations.
15) Modeling behaviors and attitudes you want your children to learn.
16) Reviewing and deciding upon your own values about drug use and other aspects of living.
17) Reviewing and setting your own goals to continue to enhance relationships.
18) Direct Teaching in Teachable Moments.
19) Willingness to discuss the information and feelings about drugs.
20) Meeting regularly as a family to plan ahead and to resolve conflicts in relationships.
21) Sensitivity to each other as individuals and as a family group.

The skills offered in *CAPS* help you to apply these principles to your family. Put down on paper, the principles appear somewhat mechanical--not like living in a real family of active people. They do, however, provide *positive guidelines* for you to think about and work toward as you see how they fit into your family's life and needs. The skills are practical ones. They are intended to give you *increased flexibility* in your parenting relationships. They are also effective methods for *meeting goals* and *resolving problems*. There are no right or wrong answers about how to raise children, but there are these basic principles and skills which have been found to enable parents to deal with the day-to-day experience of living with children more constructively and with greater satisfaction.

Some suggestions for continuing on your own

1. Practice

Once the program has been completed, parents sometimes slip back into old patterns of relating. You are encouraged to *continue to practice your parenting skills*. You may not always be successful, but as you experiment you will find what works for you and your child--what helps both of you to feel good about yourselves and each other and what helps you both to learn "skills for living."

After all, "*practice makes perfect.*" A tennis pro practices daily to maintain a high level of skill. So does a pianist or a race car driver.

The communication and parenting skills are indeed skills which require continued use in order to be maintained.

2. Set Goals For Yourself

Continue to think about your behavior and your children's in constructive ways. Assess what you would like to see continued--and *plan how to encourage such behavior* for yourself as well as for your child. Analyze what you feel are problem behaviors and state positive goals. Use your skills to work towards meeting those goals and periodically review where you are. *Goal setting, review and assessment is similar to self-structuring*. Getting into the habit will go a long way in reducing frustration and increasing feelings of achievement satisfaction.

3. Use Your *Workbook*

When you have a parent-child problem that is puzzling, use your *CAPS Parent Workbook* as a *helpful resource*. In particular, Unit III on *Problem-solving* can be very helpful in analyzing the situation and deciding how to go about resolving it. Keeping the *Workbook* with other books you use regularly will help keep it within easy reach when you want it.

4. Maintain Group Contact

In the past, as mentioned earlier, parents have *maintained relationships which formed in the group*. This has occurred both on an individual basis and on a group basis. Parents find that they are a great source of support for one another and many have found that they are good friends, as well. *Keep your class list handy:* calling a friend to listen and explore alternatives with you when you are in a quandry about a problem is like having a booster shot, adding extra strength and effectiveness to what already exists. And it doesn't hurt.

Your group may wish to continue meeting. *CAPS* groups in the past have met once or twice a month on their own. Some choose to meet for informal discussion. Others set up topics for discussion and even arrange to bring speakers in, borrow films, and role play problems that have been difficult to resolve.

Individual parents and groups have their own unique ways of responding to the ending of the CAPS *Program*. Consider the suggestions and decide on which of them might be helpful to you. Use your decision-making skills to consider other alternatives as well. You're on your way! Best wishes!

Your Own Notes

Session 9
Class Worksheet
To be completed in class.

This worksheet is intended to be an inventory and self-evaluation of your relationship with your child. When you have completed it, go back to Session 1 in which you completed a similar inventory. This will be used as part of the class activities this week.

I. List three behaviors of your child that you like and would like to see continued. Try to be as specific as possible.

Example: "I like it that Sue faithfully puts her dirty clothes in the hamper without my telling her."

1.

2.

3.

II. List three behaviors of your child which you dislike and would like to help change.

Example: "I don't like it that Jim argues about bedtime almost every night."

1.

(continued on next page)

2.

3.

III. List three things you now feel you do well as a parent with that child in particular.

Example: "I think I do a pretty good job of helping Bob with his homework. I'm pretty patient with him."

1.

2.

3.

IV. List three things you sometimes do as a parent which you would rather not do with that child--but have not yet found alternative behaviors.

1.

(continued on next page)

2.

3.

V. Below is a list of child behaviors that may be a problem for some families. These are behaviors that are a problem at one time or another for almost every child. Check the ones that are presently a problem for you or your child. Is there any change from when you first completed this list? If you have more than one child, put the child's initials next to that problem.

_____ eating problems
_____ bedtime problems
_____ won't do chores
_____ helplessness
_____ arguing
_____ physical violence
_____ stealing
_____ sassing
_____ fighting
_____ messy room
_____ anger outbursts
_____ bossiness
_____ poor school marks
_____ lying
_____ dawdling
_____ swearing
_____ inconsiderateness
_____ shyness

VI. Which of these have you been able to cut down on and replace with more constructive parenting methods? Check (✓) those which you have cut down on. Place an X next to those which you still slip into. You may add others too. Not all parent-child problems are necessarily the child's problem alone. Parents may contribute to the problem as well through some of their own behaviors.

_____ talking, lecturing
_____ showing disappointment
_____ arbitrarily taking away privileges
_____ getting angry
_____ giving orders
_____ ridiculing
_____ name calling
_____ shaming
_____ interrogating
_____ criticizing
_____ yelling at
_____ complaining
_____ threats
_____ using sarcasm
_____ spanking
_____ blaming
_____ withdrawing
_____ nagging
_____ scolding

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VII. Now check back to Session 1. Review the goals which you set at that time.

1) Have you attained your goals? State the goals you have achieved. Be specific.

2) Were they realistic to expect? If not, what goals would be realistic in similar situations?

3) What have you learned to help you change your behaviors?

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4) What other goals will you set at this time? Be specific.